

Mail or Deliver to: City of Muskego
City Assessor's Office
W182S8200 Racine Avenue
Muskego, WI 53150

(262) 679-4143
(262) 679-5670 FAX
assessor@cityofmuskego.org

REQUEST FOR REVIEW OF PROPERTY ASSESSMENT

(For an accurate review, it is essential that this questionnaire be completed fully)

Tax Key Number _____ Property Address _____

Request Made By _____

Owner _____ Other* _____

(*If other please attach owner's authorization for request)

Current Assessment: Land _____ Bldg _____ Total _____

In your opinion, what is the fair market value of the property as of January 1, 2020? _____

Request is made for the following reason: _____

When and how was the property acquired? Month _____ Year _____

Purchased _____ Trade _____ Gift/Inheritance* _____ Other* _____

*Describe _____

If purchased, what was the total purchase price? _____

If purchased, was the property listed for sale through a realtor? _____

Have you or a tenant of yours improved, remodeled, added to or changed the property since acquiring it?

Yes _____ No _____ Describe changes _____

When were changes made? _____ Cost of changes? _____

Does the above figure include the value of all labor, including your own, if any? _____ Yes _____ No

SEE REVERSE PAGE

Have you listed the property for sale, within the last three years? _____ Yes _____ No

If so, when and how long was the property listed? _____

Realty Company/Name _____ For sale by owner _____

What was the asking price? _____ Offers received? \$ _____, \$ _____

Has an appraisal been made of the property within the last two years? _____ Yes _____ No (If yes, attach copy)

If so, when and for what purpose? _____ Appraised Value \$ _____

Are there any specific items you wish to call to the appraiser's attention? _____

Is part or all of the property currently leased or rented? _____ *Yes _____ No
(*If yes, please provide a copy of your current rent roll and copies of your Income & Expense Statements for the past 3 years)

I wish to request a review of the property assessment listed above.

Signature _____ Date _____

Home Phone # : _____ Work Phone # : _____

After completing this form please e-mail, mail or deliver it to our office. An appraiser from our staff may contact you to arrange an appointment to make a physical inspection of your property. This inspection enables our office to gather the necessary data to facilitate the review. Upon completion of the review of your assessment, you will then be notified by mail as to the results of your review.

A sincere effort will be made to ensure that your assessment will be fair and equitable for the coming year. Your cooperation and patience in this matter is much appreciated.

NOTE: This request is not a substitution for a request to appear at the Board of Review. You must notify the Clerk of your intent to appear before the Board of Review 48 hours in advance of the meeting. Please contact the City Clerk at (262) 679-4100 for further information.