

REASSESSMENT REQUEST

I request the assessment be reviewed on the property listed as:

Property Number ___ - ___ - ___ - ___ - ___

Name of Owner _____

Property Address _____

Mailing Address _____

I request that my assessment be reviewed for the following reason(s):

1. I recently purchased the property for \$_____ on _____.
2. I recently built my home for a cost of \$_____ (Contractors bills attached).
3. A recent appraisal dated _____ states the value at \$_____.
(Copy of appraisal attached)
4. I do not believe my property would sell for the market value listed because:
 - a. The condition is _____

 - b. Properties in the neighborhood have sold for less. The following are examples:

 - c. The following properties are worth the same, but are assessed at lower values than mine:

 - d. Other: _____

Signed: _____ Dated: _____

Return Completed Form to:
 Supervisor of Assessments
 Ford County Courthouse
 200 W. State Room 104
 Paxton, IL 60957
 217 379-9430

Received ___/___/___
 To Assessor ___/___/___