

**BOARD OF EQUALIZATION AND REVIEW**  
**APPEAL FORM**

Owner Name(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Parcel Number: \_\_\_\_\_

Property Address: \_\_\_\_\_

**Appeal Forms must be submitted by April 13, 2020**

All real property is to be appraised at 100% of its fair market value as of each general reappraisal. Jackson County's last reappraisal of real property was January 1, 2016. The next reappraisal is January 1, 2021. Appeal is for tax year 2020.

Owner's opinion of market value as of 01/01/2016? \$ \_\_\_\_\_

List supporting evidence to confirm your opinion of market value:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please attach any documents that are being submitted to support your opinion of value.**

I certify that the above information is true and correct.

\_\_\_\_\_  
Appellant's Name (Print)                      \_\_\_\_\_                      Date                      \_\_\_\_\_                      Daytime Phone #

\_\_\_\_\_  
Appellant's Signature                      \_\_\_\_\_                      Appellant's Email