

**MADISON COUNTY BOARD OF REVIEW
RESIDENTIAL COMPLAINT - ASSESSMENT YEAR 2016**

1. PARCEL I.D. NUMBER _____ DATE _____
2. Is there a pending state appeal on this parcel? ☐ YES ☐ NO
3. Are you requesting Farm Land assessment? ☐ YES ☐ NO
4. **DO YOU WISH TO WAIVE YOUR RIGHT TO AN ORAL HEARING?** ☐ YES ☐ NO

THIS FORM MUST BE COMPLETED & FILED IN TRIPLICATE WITHIN 30 DAYS OF TOWNSHIP PUBLICATION. PLEASE INCLUDE 2 COPIES OF ALL EVIDENCE WITH YOUR PETITION. NO ADDITIONAL EVIDENCE WILL BE ACCEPTED THEREAFTER.

5. *Appellant ☐ _____ **Attorney ☐ _____
Street/P.O. Box _____ Street/P.O. Box _____
City _____ Zip _____ City _____ Zip _____
Telephone (____) _____ Telephone (____) _____
E-mail _____ E-mail _____

5a. Property Address ☐ _____

(*If appellant is other than owner, give name and address of owner. **If so represented.)

6. Appeal is based on: (Note: Law requires assessment to be 1/3 of Market Value)

- A. ☐ Over valuation/under valuation D. ☐ Appraisal or equivalent
B. ☐ Contention of Law (Supply brief) E. ☐ Recent purchase date _____ price _____
C. ☐ Unequal treatment in the Assessment Process F. ☐ Other _____

7. The assessed value placed on Real Property for the above assessment year is as follows:

	LAND	IMPROVEMENTS	TOTAL
A. By Assessor	_____	_____	_____
B. Appellant's Claim	_____	_____	_____

8. New Construction Date _____ Construction Cost _____

9. Any addition, improvement, since purchase ☐ yes ☐ no Date of Addition _____

10. What is your opinion of the Market Value on January 1st, 2016 _____

YOU MUST SUBMIT 2 COPIES OF PROPERTY RECORD CARDS AND PHOTOGRAPHS OF EACH COMPARABLE USED AS WELL AS THE SUBJECT.

11. To prove Market Value, you may: (1) submit an appraisal, (2) submit comparable sales, (3) If new, submit proof of construction costs, or (4) if INCOME PROPERTY, submit operating statement for last two years.

If you have comparables, list below. Sales should be within one year of assessment date.

	PARCEL NUMBER	ADDRESS	DATE OF SALE	SALE PRICE
1.	_____	_____	_____	\$ _____
2.	_____	_____	_____	\$ _____
3.	_____	_____	_____	\$ _____
4.	_____	_____	_____	\$ _____

12. If you feel the property is over assessed in relation to others, list below:

	PARCEL NUMBER	ADDRESS	LAND	IMPROVEMENT	TOTAL
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____

OATH

13. I do solemnly swear that the statements made and the facts set forth in the foregoing complaint is true and correct.

Appellant _____ Attorney _____
Signature _____ Signature _____

FOR BOARD USE ONLY

Date of Hearing _____ Docket No. _____

Disposition: Land _____ Improvement _____ Total _____

MADISON COUNTY BOARD OF REVIEW
157 N. MAIN - SUITE 222
EDWARDSVILLE, ILLINOIS 62025-1964
(618) 692-6210
www.co.madison.il.us

GUIDELINES FOR FILLING OUT RESIDENTIAL COMPLAINT FORMS FOR THE BOARD OF REVIEW

Complete rules of the Board of Review are available on the BOR website and at the BOR office. Without prior approval, a separate complaint form must be completed for each parcel. **NO ADDITIONAL EVIDENCE WILL BE ACCEPTED THE DAY OF THE HEARING.** The numbered sections below correspond to the same numbers on the complaint form.

STOP! IF YOUR RESIDENCE IS PART OF A FARM,
YOU MUST USE THE FARM APPEAL FORM.

1. Permanent parcel identification number. This is the number found on your tax bill and assessment notice. It is the county index number.
2. If you have a pending appeal with the Property Tax Appeal Board, check yes. If not, check no.
3. If you are requesting a Farm Assessment, please submit a Farm Affidavit.
4. By checking yes, the Board of Review will review your appeal and render a written decision without you coming to the hearing.
5. Fill in name, mailing address and phone number of property owner. A complaint filed on behalf of a corporate taxpayer must be completed and filed by an attorney licensed to practice law in the State of Illinois unless completion and filing of the complaint by a non-attorney is explicitly authorized by Illinois law. If being represented by an attorney, fill in their name, address and phone number. Check box where you want notice sent (appellant or attorney). E-mail is optional.
- 5a. If the property under appeal's situs address is different than mailing address above, fill in this line.
6. Indicate basis for appeal.
7. The current assessed values of land and improvements are available from your local assessor or the Chief County Assessor website. Improvements include all buildings and structures on the land. Land is assessed as if vacant.
- 7a. By Assessor: These values are the ones placed on your property by the local assessor and prior to any exemptions.
- 7b. Appellant's Claim: This is what you feel the assessment should be. This figure should represent 1/3 of fair market value as of January 1st of the assessment year. **FAILURE TO COMPLETE THIS SECTION WILL RESULT IN RETURN OF COMPLAINT.**
8. 9. 10. Fill in the applicable spaces.
11. If appeal is based on **6a**, overvaluation, fill in this section. Copies of property record cards of all comparable's must be submitted with complaint forms. You can get the property record cards from your local assessor, the Chief County Assessing Official or the Board of Review. If an appraisal or market analysis is submitted, it must include comparable sales and show the adjustments of the comparable to the subject. If sale of subject is being used, attach a copy of the closing statement.
12. If this appeal is based on **6c**, unequal treatment, fill in this section. Submit copies of property record cards of comparable properties. Comparable's should be within the same neighborhood of the subject whenever possible.
13. Signature of property owner and attorney (if used) are required. All evidence must be provided **in duplicate**. It is recommended that you make a copy of the appeal and all evidence for yourself. Failure to submit evidence of over-assessment will likely result in an unsuccessful appeal.