

2019 PROPERTY TAX PROTEST

PROPERTY QUESTIONNAIRE

OWNER INFORMATION

OWNER NAME: _____

MAILING ADDRESS: _____

CITY, STATE & ZIP: _____

OWNER PHONE(S): _____ HOME WORK CELL

OWNER EMAIL: _____

Do you qualify for any of the following exemptions? (Circle all that apply)

Homestead Over 65 Disabled Other: _____

PROPERTY DETAILS

PROPERTY ADDRESS: _____

LEGAL DESCRIPTION: _____

SQUARE FEET: _____ YEAR BUILT: _____

PURCHASED LAST YEAR OR THIS YEAR? (Circle One) YES NO

OWNER EMAIL: _____

Do you qualify for any of the following exemptions? (Circle all that apply)

Homestead Over 65 Disabled Other: _____

PROPERTY CONDITION

PROPERTY CONDITION: EXCELLENT GOOD FAIR POOR

Do you have any maintenance that needs to be done? YES NO

IF YES, PLEASE DESCRIBE: _____

INCLUDE INVOICES, ESTIMATES OR PROPOSALS

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Could you provide photos of areas that need repair(s)? YES NO

INCLUDE ANY PHOTOS

AGENT'S NOTES

Lined area for agent's notes.