

Return To:
Supervisor of Assessments
110 W. Water St, Suite 2
Pontiac, IL 61764

Docket No. _____

FARM COMPLAINT FORM

Property Number _____

Owner's Name _____ Phone Number _____

Owner's Address _____
Street or Rural Route City State Zip Code

Address of Property _____

Which of the following are you contesting?

_____ Farmland _____ Homesite _____ Farm Buildings _____ Residence

SECTION #1

Use of Land

_____ Farmland _____ Residential _____ Commercial _____ Industrial _____ Recreation
_____ Landfill _____ Timberland _____ Fishing/Boating Other: _____

SECTION #2

If this complaint is based on farmland, please fill out the following:

Tillable Acres _____ Permanent Pasture _____ Woodland _____ Wasteland _____ Other _____
Homesite _____ Total Acres in Parcel: _____

Is any part of parcel included in a Forestry Management program, Vegetative Filter Strip program or CRP?
If so, please list type of program and acres involved: _____

* **All farmland complaints must be accompanied by a copy of the FSA map showing tillable acres.**

SECTION #3

If this complaint is on any other type of land (other than farmland), please fill out the following:

Please list sales of three properties similar to the subject:

Parcel Number	Owner's Name	Property Address	Sale Price/Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

What is your opinion of the market value? _____

* Please submit any appraisals that have been done recently (within the last year).

SECTION #4

If your complaint is based on the farm building assessment, please fill out the following:

(Note - farm buildings are valued based on their contributory value to the farm. If no contributory value exists, values are based on the salvage value of the building).

Please list the buildings on the properties and their contributory value to the farm:

- 1. _____ 2. _____ 3. _____
- 4. _____ 5. _____ 6. _____
- 7. _____ 8. _____ 9. _____

(Others can be listed on the back of form.)

If complaint is on a newly constructed building, please fill out the following information:

Type of building: _____ Size and Characteristics: _____
 When was structure built? _____ Cost of Construction: _____

If complaint is on the assessment of a confinement building that no longer contributes to the farm, please give the type and size of building as well as the approximate date the use ended:

Type of building: _____ Size of Building: _____
 Date use ended: _____ Current use of building: _____

SECTION #5

If the complaint is on the assessment of the house, please fill out the following information:

1. When was structure built? _____ (If new, please give date complete)
2. Additions, etc: _____ Dollar Amount
 _____ Year Built
 _____ Type of Addition
3. Story Type: _____ 1sty _____ 1½ sty _____ 2sty _____ 3sty _____ Split-Level _____ Other
4. Square Footage: _____ (Outside Dimensions)
5. Type of Construction: _____ Frame _____ Brick _____ Stucco _____ Block _____ Other
6. Does the structure have a: _____ Full Basement _____ Partial Basement _____ Crawl _____ Slab
 _____ Combination (If combination, please indicate square feet in each part)
7. Does the structure have central heat? _____ Yes _____ No
8. Does the structure have central air conditioning? _____ Yes _____ No
9. Total number of Bedrooms: _____ Total number of Bathrooms: _____
10. Does the structure have an attic (with a stationary staircase)? _____ Yes _____ No
 Type of Attic: _____ Full _____ Partial _____ Finished _____ Unfinished
11. Does the structure have a finished basement? _____ Yes _____ No
 If yes, type of finished basement: _____ Recreation Room _____ Living Room
12. Does the structure have a fireplace? _____ Yes _____ No Number of fireplaces: _____
13. List three sales of homes similar to the subject:

<u>Owner's Name</u>	<u>Property Address</u>	<u>Parcel Number</u>	<u>Assessed Value</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Comments: (Please feel free to write on the back of this form or attach any information that would be helpful)

Do Not Write Below This Line
For Office Use Only

Assessment

Before BOR: L/L _____ Bldg _____ FmLand _____ FmBldg _____

Total _____

Board of Review Decision: _____

Assessment

After BOR: L/L _____ Bldg _____ FmLand _____ FmBldg _____ Total _____

2nd Appeal Decision:
