Docket #_		
	(Office Use Only)	



Livingston County Board of Review 112 W Madison St Pontiac, Illinois 61764 (815) 844-7214

FARM ASSESSMENT COMPLAINT

For Assessment Year 2021
Filing Deadline: 11/5/2021

Failure to properly complete this form and provide the necessary documentation may result in dismissal of your complaint. Complaints must be filed (in person or post-marked) on or before 30 calendar days after Date of Publication for the Assessment Year. All evidence must accompany this complaint to be considered full and complete. All requests for a reduction of over \$100,000 in assessed valuation must be accompanied by sufficient evidence (typically an appraisal). Incomplete complaint forms will be returned to the Complainant/Owner of Record, regardless of who submitted the complaint. A separate complaint must be filed for each individual parcel.

Tentative decisions will be made by the Board of Review based on evidence submitted with the Appeal. The Tax Payer will be notified of their decision by mail. If the Tax Payer is unsatisfied with the preliminary decision, they should contact the Board of Review within 10 days of the date of the Tentative Notice to schedule a hearing. Failure to appear at your scheduled hearing shall result in a dismissal and shall not be considered exhaustion of remedies for purpose of appeal or objection.

Section 1: Property Identification (required)				
Complainant/Owner of Record Information:	Property Information:			
Name:	Parcel (PIN) #:			
Address:	A 1.1			
City, St, Zip:				
Daytime Phone:				
Attorney Name, Firm:				
(If represented by an Attorney)				
Type of Property: Vacant Farmland	☐ Other			
☐ Improved Farmland (with I	puildings)			
Section 2: Opinion of Correct Assessment and Oath (required)				
The following lines must be completed. The Assessed Value is available at the Supervisor of Assessments office.				
Current Assessed Value: Homesite NonFarm Bldgs Farmland Farm Bldgs Total	Your estimate of the correct Assessed Value: Homesite NonFarm Bldgs Farmland Farm Bldgs Total			
This complaint is based on:				
(you must check one or more boxes and co	mplete the associated sections, as applicable)			
Farmed portion incorrectly assessed as non-farm	Omitted or Incorrect debasement adjustments			
☐ Incorrectly assigned productivity indexes (PI's)	☐ Contention of Law - provide/attach legal brief			
☐ Incorrect Assessment of farm building(s)	☐ Other			
I swear or affirm that: I am the taxpayer/Owner of Record, or have a tax revenue interest in this property, or I am the duly authorized attorney for the complainant; and the statements made and the facts set forth in this complaint are true and correct to the best of my knowledge; and that the above evidence is attached to this complaint. If complaint is filed by an Attorney, please attach affidavit indicating such, including their contact information.				
Signature Printed Nam	e Date			

Section 3: House Information (if applicable)				
Fill out below for residential property. If commercial or industrial property, attach a detailed description of all				
improvements, and income & expense statements for the three (3) preceding years.				
Age of house/Year constructed: House square footage (SF of living area):				
Outside Dimensions of house:				
Outside Dimensions of house:				
Design/No. Stories: ☐ 1 story ☐ 1-1/2 story ☐ 2 story ☐ Multi-level ☐ Other				
Basement:				
Garage/Carport: Size:SF ☐ None ☐ Attached ☐ Detached				
Central Air:				
Other Improvements:				
When and for how much was the most recent sale of the property? Date Price				
Section 4: Farm Building Information				
If your complaint is based on the farm building assessment, please list all structures, their sizes and proposed				
value:				
16				
2 7				
3 8				
4 9				
510				
Were any of the above structures recently built? If so, please complete Section 6.				
Were any structures recently removed? If so, please list:				
Section 5: Farm Land Information				
If your complaint is based on the farm land assessment, please indicate the # of acres included in this parcel:				
Tillable Acres Perm Pasture Woodland				
Other Homesite Total Acres In Parcel:				
Is any or part of parcel included in a Forestry Manaement program, Vegetative Filter Strip or CRP?				
If so, please list type of program and acres involved:				
A current FSA (ASCS) Map must be attached for all farmland complaints				

d general			
ruction			
rected			
Th			
. The			
Any other comments/statements you would like to be considered:			