| AS | 30 Filing | Fee Pe | r Tax | Account | is | Required |
|-----|-----------|--------|-------|---------|----|----------|
| ~ ` | | | ιαλ | Account | 13 | ncyanca |

| Form OR-B-PPP |
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for

Page 1 of 2, 150-310-064 (Rev. 01-17-24)

Oregon Department of Revenue

Oregon Property Value Appeals Board Personal Property Petition

County

• Read all instructions carefully before completing this form.

• Please print or type the requested information on both sides of this petition.

- Complete one petition form for each account you are appealing.
- Return your completed petition(s) to the address shown on the back.
- Please attach a copy of your tax statement.

• If you wish to appeal the value of a manufactured structure, use the Real Property Petition (150-310-063) instead of this petition.

Petitioner (Person in whose name petition is filed)

| 1 Check the box that applies: Owner. Owner. Person or business, other than owner, obligated to pay taxes (attach proof of obligation). | | | | | | | |
|--|--------------------|-----------------|-------------|-----------|---------------------------------|---|--|
| 2 Name-individual, corporation, or other business | 3 Telephone number | | | | | | |
| | | Daytime | | | Evening | 9 | |
| 4 Mailing address (street or PO Box) | / | 6 State | 7 ZIP cod | le | 8 Email address (optional) | | |
| For business use only | ner business 10 T | Γitle (for exan | ıple, presi | dent, vic | e president, tax manager, etc.) | | |

If a representative is named on line 11, all correspondence regarding this petition will be mailed or delivered to the representative.

| Representative To be completed when petition is signed by an authorized representative of petitioner. Only certain people qualify to act as an authorized representative. See the instructions for a list of who qualifies. | | | | | | | | | |
|--|-----------------------|------------|-----------------------------|-------------------|--------------|------------|--|--|--|
| 11 Name of representative | | 12 Teleph | none number | | | | | | |
| | | | Daytime | | | | Evening | | |
| 13 Mailing address (street or PO Box) 14 Cit | | | Dity | | 16 ZIP co | de 1 | 17 Email address (optional) | | |
| 18 Relationship to petitioner named | d on line 2 | | | | | | | | |
| 19 Oregon state bar number 20 Oregon appraiser license | | nse number | number 21 Oregon broker lic | | nse number 2 | | gon CPA or PA permit or S.E.A. number | | |
| Any refund resulting from this the county tax collector. Howe | | | | | | | written authorization is made to or business, not the petitioner. | | |
| Attendance at hearing | | | | | | | | | |
| ²³ Will you or your designated If you choose to not be pres | - | - | Yes Adecision b | No Ased on the | e written ev | vidence y | you submit. | | |
| Property information | | | | | | | | | |
| 24 Assessor's account number (fro | m your tax statement) | | 25 Cc | de area num | ber (from yo | ur tax sta | atement) | | |
| 26 Street address and city where p | roperty is located | | 27 Busines | s/property ty | pe 🗌 Reta | il 🗌 Inde | lustrial 🔄 Floating Property 🗌 Office | | |
| | | | Motel/A | partment | Small Manu | ufacturing | g Food Service Other | | |



Form OR-B-PPP Page 2 of 2, 150-310-064 (Rev. 01-17-24)

Oregon Department of Revenue

| Attach additional pages if necessary. | | | | | | | | | | |
|---|------------------|---|-----------------------------------|---|------------------------------|--|--|--|--|--|
| Description of item, category, or schedule | | Real market valu from assessor's | | RMV requested (for property as existed on assessment date) | | | | | | |
| 28 | | \$ | | \$ | | | | | | |
| 29 | | \$ | | \$ | | | | | | |
| 30 | | \$ | | \$ | | | | | | |
| 31 | | \$ | | \$ | | | | | | |
| 32 Total RMV | -> | \$ | | \$ | | | | | | |
| | | Assessed valu from tax statement or ass | | AV requested (AV is limited to the calculation allowed by law) | | | | | | |
| 33 Total assessed value (AV) | | \$ | | \$ | | | | | | |
| Evidence of property value | Include do | cumentation (recently reco | orded deeds, listin | ngs, appraisals, cons | struction bids, etc.) | | | | | |
| 34. Check any of the following that ap | oplied to the p | property at or near the assessi | ment date. Include d | ocumentation. | | | | | | |
| Property sale/purchase Date | Purchase pr | ice | Short sale or foreclosure? Yes No | | | | | | | |
| Property listing Date | Asking price | | | | | | | | | |
| Property appraisal Date | Appraiser | | Finding | | | | | | | |
| Condition issues/damages – What condition issues or damages exist? How long have they existed? Enclose additional pages if necessary: | | | | | | | | | | |
| Changes to property—What cha | inges have be | een made? When? Enclose ad | ditional pages if nec | essary: | | | | | | |
| Other (for example, market data) | | | | | | | | | | |
| Specify and provide a short explanati | on or docume | entation: | | | | | | | | |
| 35 Why do you think the value of y Provide enough information to s | | | | provided; enclose add | itional pages, if necessary. | | | | | |
| Declaration: I declare under the knowledge, it is true | | false swearing [ORS 305.990 nd complete. | (4)] that I have exan | nined this document, a | nd to the best of my | | | | | |
| 36 Signature and name of petitioner or Sign name | petitioner's rep | Print or type name | if necessary) | | 37 Date | | | | | |
| X | | . the or type halle | | | | | | | | |
| Please return For county cont | ion, visit: | When and where to file your petition File your petition in the office of the county clerk. No other county office can accept petitions. Your petition must be postmarked or delivered by December 31 to the county clerk's office in the county where the property is located. If December 31 falls on a weekend or holiday, the filing deadline moves to the next business day. Mail or deliver your petition to the address shown in the box. | | | | | | | | |
| www.oregon.gov/dor/programs/ | property/pag | es/appeals-contacts.aspx | uay. wall or delive | a your perition to the ac | uress shown in the box. | | | | | |