

Commissioner of Revenue Abatement Form 4 (Rev. 4/95)
**APPLICATION FOR REDUCTION IN VALUATION
OF REAL ESTATE AND/OR REFUND OF TAXES PAID**
(M.S. 375.192)

For Taxes Levied in _____
and Payable in 20 _____

County of _____ Please print or type.

Applicant's Name _____ Applicant's Social Security Number _____		Applicant's Mailing Address	
Telephone (work) () _____ Telephone (home) () _____			
Description of Property	Property I.D. or Parcel Number:		
Street Address (if different than above)	City or Township	School District No.	

Legal Description of Property:

ASSESSOR'S ESTIMATED MARKET VALUE:

Land \$ _____ Structures \$ _____ Total \$ _____ Class _____

APPLICANT'S STATEMENT OF FACTS:

Applicant's Request

Applicant's Signature **Date**

NOTE: Minnesota Statutes 1988, Section 609.41, "Whoever, in making any statement, oral or written, which is required or authorized by law to be made as a basis of imposing, reducing, or abating any tax or assessment, intentionally makes any statement as to any material matter which the maker of the statement knows is false may be sentenced, unless otherwise provided by law, to imprisonment for not more than one year or to payment of a fine of not more than \$3,000.00, or both"

The following accurately reflects both existing and proposed amounts.

	<u>Market Value</u>			Class	Tax Capacity	Tax Before	Other	Total
	Land	Improvements	Total			Other Credits	Credits	Payable
Original								
Proposed								
Reduction								

+ Tax is Paid Date _____, 19____ Local Tax Rate _____

+ Tax is Not Paid

REPORT OF INVESTIGATION

After examining the applicants claims, I have carefully investigated this application and find the facts to be as follows:

Signature of investigator Date

CERTIFICATIONS OF APPROVAL

Note: For this abatement to be approved, the assessor, county auditor and the county board of commissioners must all favorably recommend the adoption.

ASSESSOR'S RECOMMENDATION (County assessor or city assessor in certain cities)

+ Approved + Denied

Assessor's Signature

COUNTY AUDITOR'S RECOMMENDATION

+ Approved + Denied

Auditor's Signature

COUNTY BOARD OF COMMISSIONER'S ACTION (To be completed by county auditor)

+ Approved + Denied

I certify that at a meeting held _____, 19____ the County board, took the above official action on this abatement. This action was duly adopted and entered upon the minutes of its proceedings as a public record, showing the name(s) of taxpayer(s), other concerned persons and the amounts involved.

CERTIFICATION OF FINAL APPROVAL (Complete only for approved abatements)

I further certify that the approval of this abatement has resulted in the following changes:

Reduction Of Tax \$ _____
 Reduction Of Penalty \$ _____
 Reduction Of Interest \$ _____
 Total Reduction/Refund \$ _____
Total Payable \$ _____

Signature of County Auditor Date