## COLUMBIA COUNTY ASSESSOR REQUEST FOR PROPERTY VALUE REVIEW

REQUEST FOR PROPERTY VALUE REVIEW			☐ Internal Review Request		
For Tax Year:			Initiated by:		
			Date:		
Sections 1 and 2 to be comp		CODMATICAL			
	INTIFICATION AND CONTACT INF			2.42	
Tax Code	Account No.	Map and Ta	X LOT	MA	
Owner/Taxpayer Name (required)		Situs Address			
Owner/Taxpayer	Name (required)	Situs	Addi C33		
Daytime Phone N	Email Address				
,					
SECTION 2 - REASON FOR	PROPERTY VALUE REVIEW				
	u believe your real market value is ind	correct.			
Be sure to include any evidence	e to support your value estimate.				
Do you request an interior ir	nspection? Yes No				
Owner/Taxpayer's Estimate	- In the second				
Return or mail the form to:	Columbia County Assessor, 23	0 Strand Street, Saint I	Helens, OR 970	51	
Or download and email the	completed request form to: <b>asset</b>	ssor@columbiacountyo	r.gov		
c., dominada dira ciriali tre	- tomprocod requestronni tor <b>dese</b>		<del> </del>		
Sections 3 and 4 to be comp	leted by Assessor's Office Person	nel			
SECTION 3 - APPRAISER'S FINDINGS		SECTIO	SECTION 4 - VALUE DECISION		
Review Appraiser:	Date:	No	No Changes Recommended		
Appraiser's Explanation:	<u> </u>	RM	V/M5 Value Chan	ge	
		Exc	Exception Value Change		
			RMV/M5 Value		
			Current	Revised	
		Land			
		Imps			
		Total			
			Exception Va	alue	
			Current	Revised	

Total

Land

Imps

Total

Initials:

Initials:

□ Phone

 $\square$  No

☐ Mail

**Assessed Value** 

Revised

Current

For Office Use Only

☐ Formal Review

**FORMAL REVIEWS ONLY** 

 $\square$  Yes

☐ Email

☐ Current Year Entered in ORCATS Date:

☐ Future Year Entered in ORCATS Date:

Is/Are the account(s) under compression?

Taxpayer notified of result: ☐ In Person