



**CITY OF NOME
ADMINISTRATIVE REVIEW AND APPEAL FORM**

Appeal #:

2023-18

This form is for you to appeal the assessed valuation on your property. Complete Sections 1, 2 and 3. Retain a copy for your records, and return or mail the original copy to the City Clerk's Office. Appeals must be returned or postmarked no later than the date indicated on the Assessment Notice. The Assessor will contact you regarding your appeal.

1) I appeal the value of tax parcel #: 001.161.29

Property legal description: Block 50, Lot 5A, Mineral Survey _____, Other NONE TOWNSITE

Print Owner's Name: Patrick Deuane

Owner's Mailing Address: [REDACTED] NOME, Day Phone: 907 [REDACTED]

Alaska 99762, Evening Phone: () ↓

Address to which all correspondence should be mailed (if different than above): _____

2)

Assessor's Value	Land: <u>16,000</u>	Bldg: <u>214,400</u> 10,000	Total: <u>230,400</u>	Purchase Date: <u>NOVEMBER 2020</u>
Owner's Estimate of Value	<u>16,000</u>	<u>40,000</u>	<u>56,000</u>	

Owner's reason for estimate of value (including inventory corrections, sales of comparable properties, and property income statements, if appropriate). The Appellant bears the burden of proof. Grounds for adjustment of assessment are proof of unequal, excessive, improper, or under-valuation based on facts that are stated in a valid written appeal or proven at the appeal hearing.

I WOULD LIKE TO APPEAL THE VALUATION OF "IMPROVEMENTS" ON MY PROPERTY AT 103 E KING'S WAY. THE BUILDING IS CURRENTLY UNDER CONSTRUCTION AND IS NOT INHABITED. THE EXTERIOR IS WEATHERED IN, (MINUS EXTERIOR DOORS) AND THE INSIDE IS 100% LACKING IN FLOOR PLAN OF EMBODIMENT ON UTILITIES. INSULATION AND VAPOUR BARRIER WORK HAS BEGUN, BUT IS NOT COMPLETE. → CONTINUED ON ATTACHED

(PLEASE ATTACH STATEMENT IF YOU NEED MORE SPACE)

3) I hereby affirm that the foregoing information is true and correct, that I have read and understand the guidelines above, and that I am the owner or owner's authorized agent of the property described above.

[Signature]
Signature of owner or authorized agent

4/10/2023
Date signed

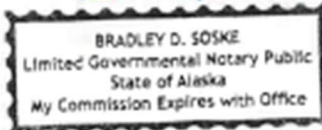
Patrick Deuane
Print Name (if different from item # 1)

SUBSCRIBED and SWORN to before me this 10th day of April, 2023

NOTARY PUBLIC in and for the STATE of ALASKA:

Commission Expires: with office

Seal:



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