

DATE: _____

Form 3101
Exhibit A
Appeal to Board of Review
by Taxpayer for Real and Personal Property
2024

Appeal Mailing address:
St. Tammany Parish Council
P. O. Box 628
Covington, LA 70434
Tel: (985) 898-2591
council@stpgov.org

PROPERTY OWNER / REPRESENTATIVE:

Name: _____ Parish/Council District of Appeal Property _____

Mailing Address: _____ City/State/Zip: _____

Assessment/Tax Bill Number: _____ Residential / Commercial (Circle One)

Address or Legal Description of Property being Appealed. (For commercial property, please also identify property by name of business): _____

I hereby appeal the assessment of the above described property pursuant to L.R.S. 47:1992. I timely filed my reports (if personal property) as required by law, and I have previously submitted a request for review of my property assessment to the Assessor's Office.

Fair Market Value (Land & Residential Property = 10 X Assessed Value) (Commercial and Movable Property = 6.67 X Assessed Value)

The assessor has determined Fair Market Value of this property at:

Land \$ _____ *Improvement \$ _____ Total \$ _____

I am requesting that the Fair Market Value of this property be fixed at:

Land \$ _____ *Improvement \$ _____ Total \$ _____

Assessed Value (Land & Residential Property: 10% of Fair Market Value) (Commercial & Movable Property: 15% of Fair Market Value)

The assessor has determined assessed value of this property at:

Land \$ _____ *Improvement \$ _____ Total \$ _____

I am requesting that the assessed value of this property be fixed at:

Land \$ _____ *Improvement \$ _____ Total \$ _____

*NOTE: Report personal property on Improvement line above, if applicable.

I understand that property is assessed at a percentage of fair market value as of January 1, 2023 which means the price for the property which would be agreed upon between a willing and informed buyer and a willing and informed seller under usual and ordinary circumstances, the highest price the property would bring on the open market if exposed for sale for a reasonable time. I understand that I must provide the Board of Review with evidence of fair market value to support my claim.

NOTE: If appellant disputes Board of Review's decision, appellant may appeal to La. Tax Commission (LTC) by completing and submitting Appeal Form 3103.A to LTC within 10 days of postal date of BOR's written determination.

For further information, call LTC at (225) 925-7830

Please notify me of the date, place and time of my appeal at the telephone number(s) & email address shown below.

APPELLANT (TAXPAYER/REPRESENTATIVE)

Name: _____

Mailing Address: _____

Email: _____

Contact No.: _____

Requests for review are due to the Parish Council Office by **SEPTEMBER 30, 2024 AT 4:30PM** and will be heard in the St. Tammany Parish Council Chambers, 21490 Koop Drive (off Hwy. 59, north of I-12), Mandeville, La. between October 7 and October 17, 2024. Appellants will be contacted and advised of hearing date & time. You may submit your documents via email and/or mail to the above address with a written statement to be reviewed by the Board of Review.