

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-25-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DMJJ FARMS INC

9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$107,229 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

15-06-25-100-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four tick marks.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-25-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-25-200-001-00	Class 9900	Acreage 82.305	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description NE 1/4 LY W OF SANGCHRIS LAKE 150682.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-06-25-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-25-200-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$71,786** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-25-200-001-01	Class 0083	Acreage 77.695	Print Date 9/23/2024	2023 Taxes: \$ 4,482.32		ESTIMATED	2024 Taxes: \$ 4,616.79
Legal Description NE1/4 THIS 77.695AC IS FOR SANGCHRIS LAKE 1998R01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	69,695	0	0	0	69,695	
	2024	71,786	0	0	0	71,786	

Land Fair Cash Val: 215,358 Building Fair Cash Val: 0 **Non-Farm Value: 215,358**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-06-25-200-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-25-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLARK SHIRLEY SUE

Address to send notice if different than shown at left:

1591 N 175 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$58,847** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-06-25-300-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,663.44		ESTIMATED	2024 Taxes: \$ 3,906.54
Legal Description W1/2 SW1/4 1999R07015 150683.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	55,185	0	0	55,185	
	2024	0	58,847	0	0	58,847	

15-06-25-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-25-300-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DMJJ FARMS INC

9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$61,059** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-06-25-300-002-00	Class 0021	Acreage 80.950	Print Date 9/23/2024	2023 Taxes: \$ 3,804.58		ESTIMATED	2024 Taxes: \$ 4,053.38
Legal Description FARM TRACT #42 E1/2 SW1/4 1998R02109 150683.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	57,311	0	0	57,311	
	2024	0	61,059	0	0	61,059	

15-06-25-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-25-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$0 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-06-25-400-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks for valuation input.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-25-400-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$59,809** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-25-400-001-01	Class 0083	Acreage 64.768	Print Date 9/23/2024	2023 Taxes: \$ 3,854.76		ESTIMATED	2024 Taxes: \$ 3,970.40
Legal Description SE1/4 THIS 64.768AC IS FOR SANGCHRIS LAKE 1998R01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	58,067	0	0	0	58,067	
	2024	59,809	0	0	0	59,809	

Land Fair Cash Val: 179,427 Building Fair Cash Val: 0 **Non-Farm Value: 179,427**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-06-25-400-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-25-400-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$0 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-06-25-400-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four tick marks for valuation input.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-25-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-25-700-001-00	Class 7100	Acreage 640.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING ALL SEC 25 157765.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-06-25-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-26-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKAGGS GARY M

Address to send notice if different than shown at left:

11931 COTTON HILL RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,330** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-26-100-001-00	Class 0021	Acreage 5.560	Print Date 9/23/2024	2023 Taxes: \$ 270.72		ESTIMATED	2024 Taxes: \$ 287.45
Legal Description W91.81 NW1/4 2004R02761 150685.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	4,078	0	0	0	4,078
	2024	0	4,330	0	0	0	4,330

15-06-26-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-26-100-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DMJJ FARMS INC

9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$102,235** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-26-100-002-00	Class 0021	Acreage 153.940	Print Date 9/23/2024	2023 Taxes: \$ 6,333.84		ESTIMATED	2024 Taxes: \$ 6,786.84
Legal Description NW1/4 EX W91.81 & EX .50AC NE COR 2004R06414 150685.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	95,411	0	0	95,411	
	2024	0	102,235	0	0	102,235	

15-06-26-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
06/26/2006	\$1,258,000	2006R03120	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-26-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

PFEFFER JOHN R FAMILY TRUST
WM ENLOW & CAPE COD FIVE BK TRUSTEES
20 WEST RD
PO BOX 20
ORLEANS MA 02653

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property,
appeals this assessment of said property at \$100,142 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated _____
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-06-26-200-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-26-200-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DMJJ FARMS INC

9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$11,487 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-06-26-200-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 06/26/2006, \$1,258,000, 2006R03120, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-26-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKAGGS GARY M

Address to send notice if different than shown at left:

11931 COTTON HILL RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,473** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-26-300-001-00	Class 0021	Acreage 1.740	Print Date 9/23/2024	2023 Taxes: \$ 92.42		ESTIMATED	2024 Taxes: \$ 97.78	
Legal Description N825' W91.81 SW1/4 2004R02761 150685.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	1,392	0	0	1,392		
	2024	0	1,473	0	0	1,473		

15-06-26-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-26-300-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DMJJ FARMS INC

9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$77,298 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for Year, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-06-26-300-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 06/26/2006, \$1,258,000, 2006R03120, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-26-300-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DMJJ FARMS INC

9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,374** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-06-26-300-003-00	Class 0021	Acreage 33.500	Print Date 9/23/2024	2023 Taxes: \$ 1,518.16		ESTIMATED		2024 Taxes: \$ 1,618.06
Legal Description E33.5AC SE1/4 SW1/4 2004R06414 150685.001		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	22,869	0	0	22,869	
		2024	0	24,374	0	0	24,374	

15-06-26-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/26/2006	\$1,258,000	2006R03120	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-26-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DMJJ FARMS INC

9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$10,071 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-06-26-400-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 06/26/2006, \$1,258,000, 2006R03120, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-26-400-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

PFEFFER JOHN R FAMILY TRUST
WM ENLOW & CAPE COD FIVE BK TRUSTEES
20 WEST RD
PO BOX 20
ORLEANS MA 02653

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$108,298 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-06-26-400-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-26-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-26-700-001-00	Class 7100	Acreage 640.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING ALL 157766.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-06-26-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-27-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCCLELLAND FORREST

Address to send notice if different than shown at left:

21026 INDIAN POINT AVE
PETERSBURG IL 62675

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$59,665** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-27-100-001-00	Class 0021	Acreage 77.570	Print Date 9/23/2024	2023 Taxes: \$ 3,720.34		ESTIMATED		2024 Taxes: \$ 3,960.84
Legal Description W1/2 NW1/4 EX 2.426AC COUNTY HIGHWAY #37 1993R02597 150687.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	56,042	0	0	56,042		
	2024	0	59,665	0	0	59,665		

15-06-27-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-27-100-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKAGGS GARY M

Address to send notice if different than shown at left:

11931 COTTON HILL RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$54,551** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-06-27-100-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,394.26		ESTIMATED	2024 Taxes: \$ 3,621.35
Legal Description E1/2 NW1/4 2004R02761 150686.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	51,130	0	0	51,130	
	2024	0	54,551	0	0	54,551	

15-06-27-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-27-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKAGGS GARY M

Address to send notice if different than shown at left:

11931 COTTON HILL RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$118,357** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-27-200-001-00	Class 0021	Acreage 160.000	Print Date 9/23/2024	2023 Taxes: \$ 7,382.98		ESTIMATED	2024 Taxes: \$ 7,857.09	
Legal Description NE1/4 2004R02761 150686.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	111,215	0	0	111,215		
	2024	0	118,357	0	0	118,357		

15-06-27-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-27-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VIGAL CEMETERY
%KAREN RICHMOND

3454 VETTEL LN
SPRINGFIELD IL 62712

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,394** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-27-300-001-00	Class 0021	Acreage 24.240	Print Date 9/23/2024	2023 Taxes: \$ 946.46		ESTIMATED	2024 Taxes: \$ 1,021.93
Legal Description N25.00AC W1/2 SW1/4 EX 0.758AC COUNTY HIGHWAY #37 1992R00867 150688.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	14,257	0	0	14,257	
	2024	0	15,394	0	0	15,394	

15-06-27-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-27-300-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKAGGS GARY M

Address to send notice if different than shown at left:

11931 COTTON HILL RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,564** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-27-300-002-00	Class 0021	Acreage 25.000	Print Date 9/23/2024	2023 Taxes: \$ 1,220.88		ESTIMATED	2024 Taxes: \$ 1,298.75
Legal Description N25.00AC NE1/4 SW1/4 2004R02761 150686.002	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	18,391	0	0	18,391	
	2024	0	19,564	0	0	19,564	

15-06-27-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-27-300-003-00 1916 N 000 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKAGGS GARY M

Address to send notice if different than shown at left:

11931 COTTON HILL RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$94,346** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-27-300-003-00	Class 0011	Acreage 53.330	Print Date 9/23/2024	2023 Taxes: \$ 6,298.72		ESTIMATED	2024 Taxes: \$ 6,263.13
Legal Description W55AC S220AC EX 1.667AC COUNTY HIGHWAY #37 1992R00868 150691.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,352	38,694	42,836	8,000	94,882	
	2024	5,980	40,973	45,143	2,250	94,346	

15-06-27-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-27-300-004-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKAGGS GARY M

Address to send notice if different than shown at left:

11931 COTTON HILL RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$82,487** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-06-27-300-004-00	Class 0011	Acreage 55.000	Print Date 9/23/2024	2023 Taxes: \$ 5,353.60		ESTIMATED	2024 Taxes: \$ 5,475.87
Legal Description S55.00AC E1/2 SW1/4 1974R14352 150690.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,713	39,996	136	36,800	80,645	
	2024	3,517	42,557	113	36,300	82,487	

15-06-27-300-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-27-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKAGGS GARY M

Address to send notice if different than shown at left:

11931 COTTON HILL RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,931** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-27-400-001-00	Class 0021	Acreage 50.000	Print Date 9/23/2024	2023 Taxes: \$ 2,561.66		ESTIMATED	2024 Taxes: \$ 2,717.19
Legal Description N50.00AC SE1/4 2004R02761 150686.003	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	38,588	0	0	38,588	
	2024	0	40,931	0	0	40,931	

15-06-27-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-27-400-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLARK SHARON ANN

Address to send notice if different than shown at left:

4967 W 14TH ST
INDIANAPOLIS IN 46224

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$76,988** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-27-400-002-00	Class 0021	Acreage 105.000	Print Date 9/23/2024	2023 Taxes: \$ 4,797.56		ESTIMATED	2024 Taxes: \$ 5,110.83
Legal Description S110.00AC SE1/4 EX 5.00AC 150692.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	72,269	0	0	72,269	
	2024	0	76,988	0	0	76,988	

15-06-27-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-27-400-003-00 95 E 1900 NORTH PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREGURICH NOAH L M

Address to send notice if different than shown at left:

6875 NEW CITY RD
ROCHESTER IL 62563

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,810** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-06-27-400-003-00	Class 0011	Acreage 5.000	Print Date 9/23/2024	2023 Taxes: \$ 965.70		ESTIMATED 2024 Taxes: \$ 784.00	
Legal Description 5.00AC SE COR SE1/4 1997R02899 150689.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,182	1,514	10,851	0	14,547	
	2024	1,910	593	9,307	0	11,810	

15-06-27-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/1991	\$25,000		Yes
02/12/2020	\$20,000	2020R00494	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-27-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$10 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for tax breakdown by year (2023, 2024) with categories: HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-06-27-700-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-34-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DOWSON DONALD & SUE

Address to send notice if different than shown at left:

9750 OLD ROUTE 66
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$56,898** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-06-34-100-001-00	Class 0021	Acreage 77.570	Print Date 9/23/2024	2023 Taxes: \$ 3,547.94		ESTIMATED	2024 Taxes: \$ 3,777.16
Legal Description N1/2 NW1/4 EX 1.214AC COUNTY HIGHWAY #37 1994R07809 150693.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	53,445	0	0	53,445	
	2024	0	56,898	0	0	56,898	

15-06-34-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-34-100-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DOWSON KATHRYN M
% DEAN DOWSON, TRUSTEE

9750 OLD ROUTE 66
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$62,464** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-06-34-100-001-01	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,903.36		ESTIMATED	2024 Taxes: \$ 4,146.65
Legal Description S1/2 NW1/4 EX 1.214AC COUNTY HIGHWAY #37 2000R01408	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	58,799	0	0	58,799	
	2024	0	62,464	0	0	62,464	

15-06-34-100-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-34-200-001-00 82 E 1900 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DOWSON DONALD & SUE

Address to send notice if different than shown at left:

9750 OLD ROUTE 66
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$93,306** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-34-200-001-00	Class 0011	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 5,712.68		ESTIMATED	2024 Taxes: \$ 6,194.09
Legal Description N1/2 NE1/4 1994R07809 150693.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,566	49,281	22,007	9,200	86,054	
	2024	5,487	52,532	26,087	9,200	93,306	

15-06-34-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-34-200-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DOWSON KATHRYN M
% DEAN DOWSON TRUSTEE

9750 OLD ROUTE 66
PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$60,964 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-06-34-200-001-01

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four tick marks for valuation input.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-34-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON MARY H MARITAL TR
%MICHAEL MEGGINSON TRUSTEE

2328 TARA LN
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$117,285** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-06-34-300-001-00	Class 0021	Acreage 159.700	Print Date 9/23/2024	2023 Taxes: \$ 7,301.72		ESTIMATED	2024 Taxes: \$ 7,785.93
Legal Description SW1/4 EX 0.304AC COUNTY HIGH-WAY #37 1999R00690 150694.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	109,991	0	0	109,991	
	2024	0	117,285	0	0	117,285	

15-06-34-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-34-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON FAMILY LAND TRUST #13

Address to send notice if different than shown at left:

2328 TARA LN
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,473** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-06-34-400-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,833.68		ESTIMATED	2024 Taxes: \$ 1,956.56
Legal Description W1/4 SE1/4 2001R07247 150694.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	27,622	0	0	27,622	
	2024	0	29,473	0	0	29,473	

15-06-34-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
02/02/2017	\$758,500	2017R00425	No
02/02/2017	\$90,000	2017R00427	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-34-400-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH THOMAS E
% REBECCA S CLINE

432 AVENUE E
DANVILLE IL 61832

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,809** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-34-400-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,858.90		ESTIMATED		2024 Taxes: \$ 1,978.86
Legal Description E1/2 W1/2 SE1/4 1998R08334 150696.000		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	28,002	0	0	28,002	
		2024	0	29,809	0	0	29,809	

15-06-34-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-34-400-002-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HALE ELIZABETH J
%REBECCA CLINE

432 AVENUE E
DANVILLE IL 61832

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,505** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-34-400-002-01	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,636.58		ESTIMATED	2024 Taxes: \$ 1,759.53
Legal Description W1/2 E1/2 SE1/4 1998R08333	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	24,653	0	0	24,653	
	2024	0	26,505	0	0	26,505	

15-06-34-400-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-34-400-002-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLINE REBECCA S

Address to send notice if different than shown at left:

432 AVENUE E
DANVILLE IL 61832

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,953** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-34-400-002-02	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,799.10		ESTIMATED	2024 Taxes: \$ 1,922.04
Legal Description E1/2 E1/2 SE1/4 1998R08335		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL
		2023	0	27,101	0	0	27,101
		2024	0	28,953	0	0	28,953

15-06-34-400-002-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-34-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-34-700-001-00	Class 7100	Acreage 521.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLY N1/2 & W200A S1/2 135.91 LEFT TO MINE 157768.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-06-34-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-35-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

U S BANK NA TRUSTEE ANN GERHARD
TUW FBO KRIS GERHARD & KORT OLDENBU

205 S 5TH ST
SPRINGFIELD IL 62701

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$62,483** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-06-35-100-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,900.58		ESTIMATED	2024 Taxes: \$ 4,147.92
Legal Description W1/2 NW1/4 150698.001		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL
		2023	0	58,757	0	0	58,757
		2024	0	62,483	0	0	62,483

15-06-35-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-35-100-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

U S BANK NA TRUSTEE ANN GERHARD
TUW FBO KRIS GERHARD & KORT OLDENBU
205 S 5TH ST
SPRINGFIELD IL 62701

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property,
appeals this assessment of said property at \$58,176 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-06-35-100-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-35-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EIKE TIM

Address to send notice if different than shown at left:

10850 OLD ROUTE 66
GLENARM IL 62536

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,293** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-35-200-001-00	Class 0021	Acreage 38.480	Print Date 9/23/2024	2023 Taxes: \$ 1,699.26		ESTIMATED	2024 Taxes: \$ 1,811.84
Legal Description NW1/4 NE1/4 EX N200 W1/2 NE1/4 NW1/4 NE1/4 2004R07107 150697.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	25,597	0	0	25,597	
	2024	0	27,293	0	0	27,293	

15-06-35-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
11/01/2004	\$156,806	2004R07107	No
02/20/2008	\$231,000	2008R00807	No
05/06/2008	\$267,200	2008R02391	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-35-200-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DYER CURTIS & ALEXANDRIA

Address to send notice if different than shown at left:

1101 LINCOLN ST
PAWNEE IL 62558

Four blank lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$4,226 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 12,678 Building Fair Cash Val: 0 Non-Farm Value: 12,678

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Table with columns: Date Sold, Sale Price, Doc#, Qualified? (Sales History)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-06-35-200-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-35-200-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

STULTS SANDRA

Address to send notice if different than shown at left:

50 CAROLE RD
SPRINGFIELD IL 62711

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$60,686** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-35-200-003-00	Class 0011	Acreage 79.000	Print Date 9/23/2024	2023 Taxes: \$ 3,790.44		ESTIMATED	2024 Taxes: \$ 4,028.62
Legal Description E 1/2 NE 1/4 EX 1.00AC NE 1/4 NE 1/4 150697.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	55,098	0	2,000	57,098	
	2024	0	58,686	0	2,000	60,686	

15-06-35-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
03/11/2009	\$255,000	2009R01402	No
07/14/2022	\$255,000	2022R02615	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-35-200-004-00 1879 N 200 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUTLER LINDA

Address to send notice if different than shown at left:

1879 N 200 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$68,020** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-35-200-004-00	Class 0010	Acreage 1.000	Print Date 9/23/2024	2023 Taxes: \$ 4,064.80		ESTIMATED		2024 Taxes: \$ 4,117.18
Legal Description BEG NE COR S1030.88' W195.87' S222.39' E195.87' N222.39' TO BEG 1993R04504 150697.003	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,138	0	60,093	0	67,231		
	2024	7,033	0	60,987	0	68,020		

Land Fair Cash Val: 21,099 Building Fair Cash Val: 182,961 **Non-Farm Value: 204,060**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1993	\$34,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-06-35-200-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-35-200-005-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

STULTS SANDRA

Address to send notice if different than shown at left:

50 CAROLE RD
SPRINGFIELD

IL 62711

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$32,061 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-06-35-200-005-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four tick marks for valuation input.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-35-300-001-00 105 E 1800 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCTAGGART JOHN T & BONNIE S TTEES

Address to send notice if different than shown at left:

4341 GALLOWAY RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,633** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-35-300-001-00	Class 0011	Acreage 30.000	Print Date 9/23/2024	2023 Taxes: \$ 1,657.96		ESTIMATED	2024 Taxes: \$ 1,701.64	
Legal Description SW1/4 EX E130.00AC 2001R00286 150699.000		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	19,375	0	5,600	24,975	
		2024	0	20,733	0	4,900	25,633	

15-06-35-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/19/2013	\$520,650	2013R01194	No
03/19/2013	\$520,650	2013R01193	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-35-300-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCTAGGART JOHN T & BONNIE S TTEES

Address to send notice if different than shown at left:

4341 GALLOWAY RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$93,749** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-06-35-300-001-01	Class 0021	Acreage 130.000	Print Date 9/23/2024	2023 Taxes: \$ 5,823.94		ESTIMATED	2024 Taxes: \$ 6,223.50
Legal Description E130.00 AC SW1/4	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	87,730	0	0	87,730	
	2024	0	93,749	0	0	93,749	

15-06-35-300-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-35-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GERHARD LUCILLE H ESTATE 1
 %US BANK FARM MANAGEMENT
 3RD FL
 205 S 5TH ST
 SPRINGFIELD IL 62701

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$110,480** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-06-35-400-001-00	Class 0021	Acreage 160.000	Print Date 9/23/2024	2023 Taxes: \$ 6,848.78		ESTIMATED	2024 Taxes: \$ 7,334.18
Legal Description SE1/4 2004R05177 150700.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	103,168	0	0	103,168	
	2024	0	110,480	0	0	110,480	

15-06-35-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
 Signed: _____ Date ___ / ___ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-35-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-35-700-001-00	Class 7100	Acreage 480.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLY ALL SEC 35 EX SE1/4 157769.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-06-35-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-36-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLARK SHIRLEY SUE

Address to send notice if different than shown at left:

1591 N 175 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$57,832** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-36-100-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,591.48		ESTIMATED	2024 Taxes: \$ 3,839.16
Legal Description N1/2 NW1/4 1999R07015 150701.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	54,101	0	0	54,101	
	2024	0	57,832	0	0	57,832	

15-06-36-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-36-100-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DMJJ FARMS INC

9750 OLD STATE RTE 66

PAWNEE

IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$60,501 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-06-36-100-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Four red vertical lines for inputting assessed valuations.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-36-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-36-200-001-00	Class 9900	Acreage 125.337	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description NE1/4 EX 0.74AC TO STATE & EX FOR SANGCHRIS LAKE ST DOC# 98-11-10 150701.002	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-06-36-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-36-200-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,336** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-36-200-001-01	Class 0083	Acreage 33.923	Print Date 9/23/2024	2023 Taxes: \$ 2,019.62		ESTIMATED	2024 Taxes: \$ 2,080.23
Legal Description NE1/4 33.923AC IS FOR SANGCHRIS LAKE 1998R01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	30,423	0	0	0	30,423	
	2024	31,336	0	0	0	31,336	

Land Fair Cash Val: 94,008 Building Fair Cash Val: 0 **Non-Farm Value: 94,008**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-06-36-200-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-36-200-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-06-36-200-002-00	Class 9900	Acreage 0.740	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description PART SE1/4 NE1/4 150702.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-06-36-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-36-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-36-300-001-00	Class 9900	Acreage 84.167	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description SW1/4 EX W1/2 W1/2 ST DOC# 98-11-10 150701.003	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-06-36-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-36-300-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

FRY KEITH W

Address to send notice if different than shown at left:

1108 RUTH PL
PAWNEE

IL 62558

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$30,468 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-06-36-300-001-01

Required

Complainant's Estimated Correct Assessed Valuations:

Four vertical lines for estimated valuations.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-36-300-001-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,855** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-36-300-001-02	Class 0083	Acreage 35.591	Print Date 9/23/2024	2023 Taxes: \$ 2,117.54		ESTIMATED	2024 Taxes: \$ 2,181.07
Legal Description SW1/4 35.591AC IS FOR SANGCHRIS LAKE 1998R01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	31,898	0	0	0	31,898	
	2024	32,855	0	0	0	32,855	

Land Fair Cash Val: 98,565 Building Fair Cash Val: 0 **Non-Farm Value: 98,565**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-06-36-300-001-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-36-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-06-36-400-001-00	Class 9900	Acreage 23.056	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description SE1/4 EX 10.98AC TO THE STATE OF ILLINOIS & FARM TRACT #36 & EX SANGCHRIS LAKE ST DOC# 98-11-10 150703.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-06-36-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-36-400-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAM FAMILY LP

Address to send notice if different than shown at left:

2356 W BOARMAN RD
DIVERNON IL 62530

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,340** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-36-400-001-01	Class 0021	Acreage 47.800	Print Date 9/23/2024	2023 Taxes: \$ 1,408.98		ESTIMATED 2024 Taxes: \$ 1,501.07	
Legal Description FARM TRACT #36 PART SE1/4 1999R00174	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	21,908	0	0	21,908	
	2024	0	23,340	0	0	23,340	

15-06-36-400-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/26/2012	\$5,170,000	2012R07047	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-36-400-001-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$72,207** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-06-36-400-001-02	Class 0083	Acreage 78.164	Print Date 9/23/2024	2023 Taxes: \$ 4,508.62		ESTIMATED	2024 Taxes: \$ 4,643.87
Legal Description SE1/4 78.164AC IS FOR SANGCHRIS LAKE 1998R01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	70,104	0	0	0	70,104	
	2024	72,207	0	0	0	72,207	

Land Fair Cash Val: 216,621 Building Fair Cash Val: 0 **Non-Farm Value: 216,621**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-06-36-400-001-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-36-400-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-06-36-400-002-00	Class 9900	Acreage 10.980	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description 10.98AC IN SE1/4 150703.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-06-36-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-06-36-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$10 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed breakdown table for 2023 and 2024 with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-06-36-700-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes handwritten entries for Joy, Ed, and Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-16-100-001-00 504 E 2225 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DENNISON WILLIAM E JR

Address to send notice if different than shown at left:

504 E 2225 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,770** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-16-100-001-00	Class 0010	Acreage 3.000	Print Date 9/23/2024	2023 Taxes: \$ 1,138.32		ESTIMATED 2024 Taxes: \$ 1,261.16	
Legal Description PART NW1/4 NW1/4 NW1/4 LY N OF RIVER 1992R04636 MHRE 150375.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	11,420	0	13,327	0	24,747	
	2024	11,253	0	15,517	0	26,770	

Land Fair Cash Val: 33,759 Building Fair Cash Val: 46,551 **Non-Farm Value: 80,310**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-16-100-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-16-100-002-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PETERS AUSTIN G & MIRANDA J

Address to send notice if different than shown at left:

2008 E LAKE SHORE DR
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,083** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: PROPERTY CHANGED FROM FARM TO NON-FARM CLASSIFICATION

Parcel Number 15-07-16-100-002-00	Class 0021	Acreage 10.000	Print Date 9/23/2024	2023 Taxes: \$ 61.02		ESTIMATED		2024 Taxes: \$ 65.76
Legal Description NE 1/4 NW 1/4 NW 1/4 1979R26529 150374.000		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	13,896	0	0	0	13,896	
		2024	0	1,083	0	0	1,083	

15-07-16-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/13/2020	\$125,213	2020R03965	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-16-100-003-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HOMEIER JOHN CHRISTIAN TRUSTEE

Address to send notice if different than shown at left:

2133 N 625 EAST RD
EDINBURG IL 62531

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$28,296 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed breakdown table for 2023 and 2024 with categories: HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-07-16-100-003-00

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Exemption History Amount Tax Year

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 01/24/2023, \$2,125,528, 2023R00206, No)

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-16-100-004-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

YEAMAN HERITAGE FARMS LLC
%CATHY J YEAMAN

860 OXFORD DR
CHATHAM IL 62629

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$37,228** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-16-100-004-00	Class 0021	Acreage 83.200	Print Date 9/23/2024	2023 Taxes: \$ 2,092.42		ESTIMATED	2024 Taxes: \$ 2,260.49
Legal Description THAT PART NW1/4 LY S&W SOUTH FORK RIVER EX NE1/4 NW1/4 NW1/4 1976R05699 150373.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	34,460	0	0	34,460	
	2024	0	37,228	0	0	37,228	

15-07-16-100-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-16-100-005-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOMEIER JOHN CHRISTIAN TRUSTEE

Address to send notice if different than shown at left:

2133 N 625 EAST RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,108** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-16-100-005-00	Class 0021	Acreage 10.000	Print Date 9/23/2024	2023 Taxes: \$ 116.64		ESTIMATED	2024 Taxes: \$ 128.00
Legal Description S10.00AC SE1/4 NW1/4 E OF THE CHANNEL 150371.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	1,921	0	0	0	1,921
	2024	0	2,108	0	0	0	2,108

15-07-16-100-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/24/2023	\$2,125,528	2023R00206	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ____ / ____ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-16-300-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

YEAMAN HERITAGE FARMS LLC
%CATHY J YEAMAN

860 OXFORD DR
CHATHAM IL 62629

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$55,489** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-16-300-001-00	Class 0021	Acreage 101.000	Print Date 9/23/2024	2023 Taxes: \$ 3,106.32		ESTIMATED	2024 Taxes: \$ 3,369.30
Legal Description N1/2 SW1/4 EX E22.00AC & S1/2 SW1/4 LY S&W OF SOUTHFORK RIVER EX 17.00AC SE COR 150373.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	51,158	0	0	51,158	
	2024	0	55,489	0	0	55,489	

15-07-16-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-16-300-002-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HOMEIER JOHN CHRISTIAN TRUSTEE

Address to send notice if different than shown at left:

2133 N 625 EAST RD
EDINBURG IL 62531

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$3,459 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-07-16-300-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 01/24/2023, \$2,125,528, 2023R00206, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-16-300-003-00 561 E 2100 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SEMANS BRUCE

Address to send notice if different than shown at left:

PO BOX 80
ROCHESTER IL 62563

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$56,420** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-16-300-003-00	Class 0010	Acreage 9.890	Print Date 9/23/2024	2023 Taxes: \$ 3,150.72		ESTIMATED		2024 Taxes: \$ 3,425.83
Legal Description PART SE1/4 SW1/4 LY E OF THE SANGAMON RIVER 1979R27619 150387.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	18,672	0	33,217	0	51,889		
	2024	18,400	0	38,020	0	56,420		

Land Fair Cash Val: 55,200 Building Fair Cash Val: 114,060 **Non-Farm Value: 169,260**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
05/19/2016	\$150,000	2016R01806	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-16-300-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-16-300-004-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SEMANS BRUCE

Address to send notice if different than shown at left:

PO BOX 80
ROCHESTER

IL 62563

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,110** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-16-300-004-00	Class 0020	Acreage 5.790	Print Date 9/23/2024	2023 Taxes: \$ 376.28	ESTIMATED			2024 Taxes: \$ 371.00
Legal Description PART SE1/4 SW1/4 LY E OF THE SANGAMON RIVER 1985R10478 150388.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,197	0	0	0	6,197		
	2024	6,110	0	0	0	6,110		

Land Fair Cash Val: 18,330 Building Fair Cash Val: 0 **Non-Farm Value: 18,330**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1979	\$22,000		Yes
05/19/2016	\$150,000	2016R01806	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-16-300-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-16-300-005-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WILLIAMS JOHN R & RITA ROSE

Address to send notice if different than shown at left:

559 E 2100 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,304** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-16-300-005-00	Class 0020	Acreage 1.630	Print Date 9/23/2024	2023 Taxes: \$ 139.90		ESTIMATED 2024 Taxes: \$ 139.90	
Legal Description PART SW1/4 SE1/4 LY E OF RIVER 1978R22539 150388.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,304	0	0	0	2,304	
	2024	2,304	0	0	0	2,304	

Land Fair Cash Val: 6,912 Building Fair Cash Val: 0 **Non-Farm Value: 6,912**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-16-300-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-16-300-006-00 557 E 2100 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

NELLE MARK A

Address to send notice if different than shown at left:

557 E 2100 NORTH RD
EDINBURG

IL 62531

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$639 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 1,917 Building Fair Cash Val: 0 Non-Farm Value: 1,917

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 11/08/2005, \$162,000, 2005R06327, No)

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-07-16-300-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-16-300-007-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF EDINBURG

Address to send notice if different than shown at left:

PO BOX 350
EDINBURG

IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,932** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-16-300-007-00	Class 9921	Acreage 17.000	Print Date 9/23/2024	2023 Taxes: \$ 164.80		ESTIMATED	2024 Taxes: \$ 178.03
Legal Description 17.00AC SE COR S1/2 SW1/4 LY W SOUTHFORK RIVER 1975R00077 41% EXEMPT ST DOC# 80-11-7	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	2,714	0	0	2,714	
	2024	0	2,932	0	0	2,932	

15-07-16-300-007-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-17-100-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

TRUAX CHARLES W JR

Address to send notice if different than shown at left:

412 E 2050 NORTH RD
EDINBURG IL 62531

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$32,951 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-07-17-100-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Exemption History Amount Tax Year

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 09/12/2024, \$199,834, 2024R02738, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-17-100-002-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

TRUAX CHARLES W
% ELTA TRUAX

412 E 2050 NORTH RD
EDINBURG IL 62531

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$30,829 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-07-17-100-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-17-200-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PETER ROBERT, MARY F, LUCINDA G,
JOHN, CARL & SHEILA HOPPER

14 PENACOOK DR
ROCHESTER IL 62563

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$56,532** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-17-200-001-00	Class 0021	Acreage 110.000	Print Date 9/23/2024	2023 Taxes: \$ 3,167.78		ESTIMATED	2024 Taxes: \$ 3,432.63
Legal Description NW1/4 NE1/4 & E1/2 NE1/4 LY S&W OF SOUTHFORK RIVER 2003R09739 150393.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	52,170	0	0	52,170	
	2024	0	56,532	0	0	56,532	

15-07-17-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-17-200-002-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DENNISON WILLIAM E SR

Address to send notice if different than shown at left:

504 E 2225 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,055** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-17-200-002-00	Class 0021	Acreage 10.000	Print Date 9/23/2024	2023 Taxes: \$ 59.26		ESTIMATED	2024 Taxes: \$ 64.06
Legal Description ALL NE1/4 NE1/4 LY N OF S SOUTHFORK RIVER 1992R06943 150391.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	976	0	0	976	
	2024	0	1,055	0	0	1,055	

15-07-17-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-17-200-003-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SPENGLER CARL E & MARILYN D

Address to send notice if different than shown at left:

1197 N 100 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,735** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-17-200-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,220.84		ESTIMATED	2024 Taxes: \$ 1,319.75
Legal Description SW1/4 NE1/4 2001R02237 150395.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	20,106	0	0	20,106	
	2024	0	21,735	0	0	21,735	

15-07-17-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-17-300-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRUAX CHARLES W JR

Address to send notice if different than shown at left:

412 E 2050 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,298** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-17-300-001-00	Class 0021	Acreage 81.380	Print Date 9/23/2024	2023 Taxes: \$ 1,945.30		ESTIMATED		2024 Taxes: \$ 2,143.30
Legal Description W1/2 SW1/4 & S30 SE1/4 SW1/4 & S16' SW1/4 SE1/4 1997R04214 150398.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	32,037	0	0	32,037		
	2024	0	35,298	0	0	35,298		

15-07-17-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
09/12/2024	\$199,834	2024R02738	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-17-300-002-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SPENGLER CARL E & MARILYN D

Address to send notice if different than shown at left:

1197 N 100 EAST RD
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,073** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-17-300-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,057.26		ESTIMATED	2024 Taxes: \$ 1,158.12
Legal Description NE 1/4 SW 1/4 2001R02237 150399.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	17,412	0	0	17,412	
	2024	0	19,073	0	0	19,073	

15-07-17-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-17-300-003-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRUAX CHARLES W

Address to send notice if different than shown at left:

412 E 2050 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,903** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-17-300-003-00	Class 0021	Acreage 39.100	Print Date 9/23/2024	2023 Taxes: \$ 1,163.52		ESTIMATED	2024 Taxes: \$ 1,269.23
Legal Description SE1/4 SW1/4 EX S30' 150400.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	19,162	0	0	0	19,162
	2024	0	20,903	0	0	0	20,903

15-07-17-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-17-400-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SPENGLER CARL E & MARILYN D

Address to send notice if different than shown at left:

1197 N 100 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$98,639** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-17-400-001-00	Class 0011	Acreage 160.810	Print Date 9/23/2024	2023 Taxes: \$ 5,562.22		ESTIMATED	2024 Taxes: \$ 5,989.38
Legal Description SE1/4 EX S16 SW1/4 SE1/4 2001R02237 150401.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	86,604	0	5,000	91,604	
	2024	0	93,639	0	5,000	98,639	

15-07-17-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-17-750-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

H&R OIL PROPERTIES INC
% DANNY J TRACY

PO BOX 366
MARINE IL 62061

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-17-750-001-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description OIL LEASE WORKING INT EDINBURG WEST WATERFLOOD UNIT W1/2 SEC 16 LY S & W SEC17 14 3W INCLUDES ROY & ORI 158291.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0		
	2024	0	0	0	0	0		

15-07-17-750-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-17-750-002-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SPENGLER CARL E & MARILYN D

Address to send notice if different than shown at left:

1197 N 100 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-17-750-002-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description OIL LSE RYLTY INT EDINBURG WEST WATERFLOOD UNIT W1/2 SEC LY S & W SEC 17 14 3W	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	
	2024	0	0	0	0	0	0	

15-07-17-750-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-18-100-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

YEAMAN JO ANN & LONNIE & DEBRA
CO TRS YEAMAN FAMILY TR %JO ANN YEAM,

5959 HUNTER RD
ROCHESTER IL 62563

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$46,711 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-07-18-100-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Four horizontal lines for estimated valuations.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-18-200-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

YEAMAN JO ANN & LONNIE & DEBRA
CO TRS YEAMAN FAMILY TR %JO ANN YEAM,

5959 HUNTER RD
ROCHESTER IL 62563

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,017** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-18-200-001-00	Class 0021	Acreage 60.000	Print Date 9/23/2024	2023 Taxes: \$ 1,518.62		ESTIMATED	2024 Taxes: \$ 1,640.48
Legal Description THAT PART NE1/4 LY N&W OF THE SOUTHFORK RIVER 1977R18017 150404.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	25,010	0	0	25,010	
	2024	0	27,017	0	0	27,017	

15-07-18-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-18-200-002-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES

Address to send notice if different than shown at left:

1 NATURAL RESOURCES WAY
 SPRINGFIELD IL 62702

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-18-200-002-00	Class 9900	Acreage 100.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description PART W1/2 NE S & E OF RIVER & E1/2 NE1/4 2004R04403 ST DOC# 14-11-3 150403.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-07-18-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
07/17/2014	\$1	2014R02658	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-18-300-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-18-300-001-00	Class 9900	Acreage 119.880	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description SW1/4 150406.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-07-18-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-18-400-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$0 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-07-18-400-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-18-700-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-18-700-001-00	Class 7100	Acreage 220.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING SE & E1/2 SW1/4 FRACT 1/4 157736.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-07-18-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-19-100-001-00 360 E 2050 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$0 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-07-19-100-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four tick marks for valuation input.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-19-100-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$228,303** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-19-100-002-00	Class 0080	Acreage 40.784	Print Date 9/23/2024	2023 Taxes: \$ 13,458.82		ESTIMATED		2024 Taxes: \$ 13,862.60
Legal Description LY N OF ROAD S1/2 FRAC NW1/4 150409.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	23,336	0	198,317	0	221,653		
	2024	24,036	0	204,267	0	228,303		

Land Fair Cash Val: 72,108 Building Fair Cash Val: 612,801 **Non-Farm Value: 684,909**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-19-100-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-19-100-002-01 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,127** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-19-100-002-01	Class 0083	Acreage 19.636	Print Date 9/23/2024	2023 Taxes: \$ 1,068.62		ESTIMATED	2024 Taxes: \$ 1,100.68
Legal Description SANGCHRIS LAKE LY S OF ROAD S1/2 NW1/4 1998R01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	17,599	0	0	0	17,599	
	2024	18,127	0	0	0	18,127	

Land Fair Cash Val: 54,381 Building Fair Cash Val: 0 **Non-Farm Value: 54,381**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-19-100-002-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-19-200-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-19-200-001-00	Class 9900	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description NW1/4 NE1/4 150410.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-07-19-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-19-200-002-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRUAX KENNETH W

611 W PLEASANT ST
EDINBURG IL 62531

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,101** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-19-200-002-00	Class 0011	Acreage 59.950	Print Date 9/23/2024	2023 Taxes: \$ 1,960.78		ESTIMATED	2024 Taxes: \$ 2,131.34
Legal Description NE1/4 NE1/4 & E20' E1/2 NE1/4 & W1/2 SE1/4 NE1/4 EX BEG SW COR E1/2 NE1/4 E180.00'N80.00' NWLY237.22' S TO POB 1988R02541 150408.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	31,792	0	500	32,292	
	2024	0	34,601	0	500	35,101	

15-07-19-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
09/12/2024	\$199,834	2024R02736	No
09/12/2024	\$199,834	2024R02737	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-19-200-003-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,207** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-19-200-003-00	Class 0083	Acreage 33.937	Print Date 9/23/2024	2023 Taxes: \$ 837.52		ESTIMATED	2024 Taxes: \$ 862.65
Legal Description LY N OF ROAD SW1/4 NE1/4 & BEG SW COR E1/2 NE1/4 E180.00'N80.00' NWLY237.22' S TO POB 150410.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	13,793	0	0	0	13,793	
	2024	14,207	0	0	0	14,207	

Land Fair Cash Val: 42,621 Building Fair Cash Val: 0 **Non-Farm Value: 42,621**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-19-200-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-19-200-003-01 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,191** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-19-200-003-01	Class 0083	Acreage 6.713	Print Date 9/23/2024	2023 Taxes: \$ 365.00		ESTIMATED	2024 Taxes: \$ 375.92
Legal Description SANGCHRIS LAKE LY S OF ROAD SW1/4 NE1/4 1998R01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	6,011	0	0	0	6,011	
	2024	6,191	0	0	0	6,191	

Land Fair Cash Val: 18,573 Building Fair Cash Val: 0 **Non-Farm Value: 18,573**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-19-200-003-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-19-200-004-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRUAX KENNETH W

Address to send notice if different than shown at left:

611 W PLEASANT ST
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,322** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-19-200-004-00	Class 0021	Acreage 19.400	Print Date 9/23/2024	2023 Taxes: \$ 573.02		ESTIMATED	2024 Taxes: \$ 626.75
Legal Description E1/2 SE1/4 NE1/4 EX E20' 1997R04214 150412.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	9,437	0	0	9,437	
	2024	0	10,322	0	0	10,322	

15-07-19-200-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/12/2024	\$199,834	2024R02736	No
09/12/2024	\$199,834	2024R02737	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-19-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$60,400** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-19-300-001-00	Class 0083	Acreage 101.680	Print Date 9/23/2024	2023 Taxes: \$ 3,560.70		ESTIMATED	2024 Taxes: \$ 3,667.50
Legal Description FRAC SW1/4 EX 18.32AC TO STATE 1998R01242 150416.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	58,641	0	0	0	58,641	
	2024	60,400	0	0	0	60,400	

Land Fair Cash Val: 181,200 Building Fair Cash Val: 0 **Non-Farm Value: 181,200**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-19-300-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-19-300-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-19-300-002-00	Class 9900	Acreage 18.320	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description PART FRAC SW1/4 ST DOC# 98-11-10 150414.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-07-19-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-19-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
 ATTN: STATE & LOCAL TAX DEPARTMENT

 PO BOX 219071
 DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$91,637** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-19-400-001-00	Class 0083	Acreage 114.750	Print Date 9/23/2024	2023 Taxes: \$ 5,402.16		ESTIMATED	2024 Taxes: \$ 5,564.22
Legal Description SE1/4 EX 5.73AC TO STATE OF ILL 1998R01242 ST DOC# 98-11-10 150417.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	88,968	0	0	0	88,968	
	2024	91,637	0	0	0	91,637	

Land Fair Cash Val: 274,911 Building Fair Cash Val: 0 **Non-Farm Value: 274,911**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
 Signed: _____ Date ___ / ___ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-19-400-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-19-400-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-19-400-002-00	Class 9900	Acreage 45.250	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description PART SE1/4 ST DOC# 98-11-10 150418.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-07-19-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOMEIER FARM MANAGEMENT SERVICES

Address to send notice if different than shown at left:

PO BOX 19246
SPRINGFIELD IL 62794

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$45,729** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-100-001-00	Class 0021	Acreage 60.000	Print Date 9/23/2024	2023 Taxes: \$ 2,605.94		ESTIMATED	2024 Taxes: \$ 2,776.67
Legal Description W60.00AC W1/2 NW1/4 1983R44545 150431.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	42,917	0	0	42,917	
	2024	0	45,729	0	0	45,729	

15-07-20-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/1982	\$140,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-100-001-01 425 E 2050 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GEORGES THOMAS E

Address to send notice if different than shown at left:

425 E 2050 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,593** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-100-001-01	Class 0061	Acreage 13.500	Print Date 9/23/2024	2023 Taxes: \$ 2,166.38		ESTIMATED	2024 Taxes: \$ 2,039.77
Legal Description E20.00AC W1/2 NW1/4 EX 1.50AC & EX 5.00AC TRACK 1999R00557 150431.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	21,769	0	13,909	0	35,678	
	2024	21,453	0	12,140	0	33,593	

Land Fair Cash Val: 64,359 Building Fair Cash Val: 36,420 **Non-Farm Value: 100,779**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-100-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-100-001-02 425 E 2050 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GEORGES THOMAS E

Address to send notice if different than shown at left:

425 E 2050 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,217** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-100-001-02	Class 0010	Acreage 1.500	Print Date 9/23/2024	2023 Taxes: \$ 1,457.04	ESTIMATED			2024 Taxes: \$ 1,457.04
Legal Description S297' N1648.32' E220' W1/2 NW 1993R04099 220X297' 150431.002	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	8,208	0	36,129	0	44,337		
	2024	8,090	0	44,127	0	52,217		

Land Fair Cash Val: 24,270 Building Fair Cash Val: 132,381 **Non-Farm Value: 156,651**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	9341
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	17221

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-100-001-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-100-001-03 423 E 2050 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

GEORGES THOMAS E &
PATTY A BAKER

425 E 2050 NORTH RD
EDINBURG IL 62531

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property,
appeals this assessment of said property at \$31,510 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 46,419 Building Fair Cash Val: 48,111 Non-Farm Value: 94,530

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-100-001-03

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-100-002-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DAMBACHER PUCETTI FARMS INC
%MR LAWRENCE A DAMBACHER
957 E 1500 NORTH RD

TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$64,434 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

15-07-20-100-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes entry for 11/01/1979 at \$264,000.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RICHARDSON LAURA TR FARM 3
 %US BANK FARM MANAGEMENT
 3RD FL
 205 S 5TH ST
 SPRINGFIELD IL 62701

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,966** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-20-200-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,292.26		ESTIMATED	2024 Taxes: \$ 1,394.50
Legal Description NW1/4 NE1/4 150428.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	21,282	0	0	21,282	
	2024	0	22,966	0	0	22,966	

15-07-20-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-002-00 493 E 2080 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RICHARDSON DENNIS E & KATHY J

Address to send notice if different than shown at left:

493 E 2080 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$59,848** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: FARM OUT BUILDING ADDED
RECALCULATION OF FARMLAND ASSESSMENT

Parcel Number 15-07-20-200-002-00	Class 0011	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 2,789.44		ESTIMATED		2024 Taxes: \$ 2,831.93
Legal Description W1/2 NE1/4 NE1/4 2004R01857 150427.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,213	6,978	35,038	9,710	56,939		
	2024	5,277	7,678	37,183	9,710	59,848		

15-07-20-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY SEN FREEZE	6000 5000 2209

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1996	\$45,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRUAX CHARLES W ET AL

Address to send notice if different than shown at left:

412 E 2050 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,428** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-200-003-00	Class 0021	Acreage 13.400	Print Date 9/23/2024	2023 Taxes: \$ 416.54		ESTIMATED	2024 Taxes: \$ 451.03
Legal Description E1/2 NE1/4 NE1/4 EX S444' 1997R01979 150426.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	6,860	0	0	6,860	
	2024	0	7,428	0	0	7,428	

15-07-20-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1997	\$48,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-003-01 497 E 2080 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WATSON DAVID D &
CHERYL MANFREDO

222 N DANIEL AVE
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,960** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: PARTIAL ASSESSMENT FOR NEW BUILDING

Parcel Number 15-07-20-200-003-01	Class 0010	Acreage 3.370	Print Date 9/23/2024	2023 Taxes: \$ 845.60	ESTIMATED			2024 Taxes: \$ 1,637.02
Legal Description BEG SE COR NE 1/4 NE 1/4 W333.55' N444.02' E326.83' S444.03' TO BEG 1995R02894	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,214	0	6,712	0	13,926		
	2024	12,033	0	14,927	0	26,960		

Land Fair Cash Val: 36,099 Building Fair Cash Val: 44,781 **Non-Farm Value: 80,880**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/29/2005	\$35,000	2005R01752	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-200-003-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-004-00 495 E 2080 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

RHODES DUSTIN MJ & LINDSEY D

Address to send notice if different than shown at left:

495 E 2080 NORTH RD
EDINBURG IL 62531

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$56,450 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 35,220 Building Fair Cash Val: 134,130 Non-Farm Value: 169,350

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Exemption History, Amount, Tax Year 2023, Tax Year 2024.

Table with columns: Sales History, Date Sold, Sale Price, Doc#, Qualified?.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-200-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-005-00 457 E 2050 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

NESTER MARK A & VALERIE

Address to send notice if different than shown at left:

49 WIENOLD LN
SPRINGFIELD IL 62711

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$51,880 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 87,780 Building Fair Cash Val: 67,860 Non-Farm Value: 155,640

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? (Sales History)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-200-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-005-01 2065 N 475 EAST RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JENNINGS CHAD J

Address to send notice if different than shown at left:

2065 N 475 EAST RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$68,321** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-200-005-01	Class 0011	Acreage 7.000	Print Date 9/23/2024	2023 Taxes: \$ 3,688.22	ESTIMATED			2024 Taxes: \$ 3,784.14
Legal Description BEG NE COR SW1/4 NE1/4 S462.02' W660.03' N462.02' E660.03' 2000R05632	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,159	1,901	34,181	21,500	66,741		
	2024	10,333	2,128	34,360	21,500	68,321		

15-07-20-200-005-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Exemption History **Amount**
Tax Year

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/07/2007	\$58,000	2007R02797	No
01/25/2013	\$60,000	2013R00367	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-005-02 2061 N 475 EAST RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MAGERS DAVID & CAROL TRUST

Address to send notice if different than shown at left:

2061 N 475 EAST RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$115,307** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-20-200-005-02	Class 0010	Acreage 5.820	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description BEG NE COR SW1/4 NE1/4 S462.02' POB S384.10' W660.03' N384.10' E660.03' TO THE BEG 2000R05470	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	24,637	0	82,063	0	106,700		
	2024	29,890	0	85,417	0	115,307		

Land Fair Cash Val: 89,670 Building Fair Cash Val: 256,251 **Non-Farm Value: 345,921**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled 70-100% Ve	95700
	ELDERLY	5000
2024	OWNER OCCUPD	6000
	Disabled 70-100% Ve	100917
	ELDERLY	5000
	IMPROVEMENT	3390

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-200-005-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-005-03 465 E 2050 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ARGO JACOB E & NICOLE M

Address to send notice if different than shown at left:

465 E 2050 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$112,134** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-200-005-03	Class 0010	Acreage 2.229	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description BEG SW COR SW1/4 NE1/4 E695.90' POB N388.48' E250' S388.48' W250' TO THE BEG	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	17,760	0	115,549	0	133,309	
	2024	20,697	0	91,437	0	112,134	

Land Fair Cash Val: 62,091 Building Fair Cash Val: 274,311 **Non-Farm Value: 336,402**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled 70-100% Ve	122767
	IMPROVEMENT	4542
2024	OWNER OCCUPD	6000
	Disabled 70-100% Ve	106134

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2019	\$315,000	2019R01315	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-200-005-03

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-005-04 455 E 2050 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NICHOLS NEAL JR & RUTH M

455 E 2050 RD N
PO BOX 352
EDINBURG IL 62531

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$123,640** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-200-005-04	Class 0011	Acreage 5.104	Print Date 9/23/2024	2023 Taxes: \$ 3,905.10	ESTIMATED		
				2024 Taxes: \$ 6,839.52			
Legal Description BEG NW COR SW1/4 NE1/4 E333.48' POB S1322.02' E15' N686.01' E318.19' N636.18' W333.48' TO POB 2003R00061	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	13,662	1,649	103,715	0	119,026	
	2024	15,417	1,833	106,390	0	123,640	

15-07-20-200-005-04

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	43713
2024	ELDERLY	5000
	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-005-05 471 E 2050 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRIS LORA

Address to send notice if different than shown at left:

471 E 2050 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$138,320** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-200-005-05	Class 0010	Acreage 5.000	Print Date 9/23/2024	2023 Taxes: \$ 7,692.04	ESTIMATED			2024 Taxes: \$ 8,034.50
Legal Description BEG SE COR SW1/4 NE1/4 W379.89' N388.48' W250' S388.48' W31.70' N476.22' E660.03' S476.90' POB 2004R03799	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	24,020	0	110,070	0	134,090		
	2024	29,260	0	109,060	0	138,320		

Land Fair Cash Val: 87,780 Building Fair Cash Val: 327,180 **Non-Farm Value: 414,960**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
Tax Year 2023 IMPROVEMENT	1410

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2004	\$30,000		Yes
07/31/2007	\$34,000	2007R03773	No
10/19/2011	\$280,000	2011R04733	Yes
02/06/2017	\$300,000	2017R00487	No
06/14/2018	\$325,000	2018R01876	No
08/31/2022	\$415,000	2022R03204	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials
_____	\$ _____	\$ _____	_____
			Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-200-005-05

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-005-06 453 E 2050 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRANHAM PAUL C & PEGGY LEE

Address to send notice if different than shown at left:

PO BOX 347
EDINBURG

IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$177,977** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-200-005-06	Class 0010	Acreage 5.102	Print Date 9/23/2024	2023 Taxes: \$ 10,515.72		ESTIMATED 2024 Taxes: \$ 10,442.48	
Legal Description BEG NW COR SW1/4 NE1/4 E333.48' S1322.02' W15' N686.01' W318.19' N635.85' TO POB 2004R04938	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	24,094	0	155,089	0	179,183	
	2024	29,337	0	148,640	0	177,977	

Land Fair Cash Val: 88,011 Building Fair Cash Val: 445,920 **Non-Farm Value: 533,931**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2004	\$45,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-200-005-06

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-005-07

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WISE DENNIS L & MARCIA A

Address to send notice if different than shown at left:

23 LAKESIDE DR
AUBURN IL 62615

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,848** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-20-200-005-07	Class 0021	Acreage 5.008	Print Date 9/23/2024	2023 Taxes: \$ 219.38		ESTIMATED	2024 Taxes: \$ 233.65
Legal Description BEG SW COR SW1/4 NE1/4 N685.85' E318.19' S686.01' W317.87' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	3,613	0	0	3,613	
	2024	0	3,848	0	0	3,848	

15-07-20-200-005-07

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-007-00 2070 N 475 EAST RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MILONCUS JOSEPH W JR & ROXANN

Address to send notice if different than shown at left:

2070 N 475 EAST RD
EDINBURG IL 62531

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$81,360 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 33,759 Building Fair Cash Val: 210,321 Non-Farm Value: 244,080

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows 2023 and 2024 entries for OWNER OCCUPD with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-200-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-008-00 484 E 2080 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CROUCH JOHN & TONYA

Address to send notice if different than shown at left:

484 E 2080 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$71,960** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-200-008-00	Class 0010	Acreage 5.570	Print Date 9/23/2024	2023 Taxes: \$ 3,735.58		ESTIMATED	2024 Taxes: \$ 3,695.86
Legal Description E184 W545.5 SE1/4 NE1/4 1997R02759 150430.002	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	16,108	0	51,413	0	67,521	
	2024	15,873	0	56,087	0	71,960	

Land Fair Cash Val: 47,619 Building Fair Cash Val: 168,261 **Non-Farm Value: 215,880**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD IMPROVEMENT	6000 5093

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1997	\$132,000		Yes
10/13/2016	\$162,900	2016R03839	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-200-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-009-00 494 E 2080 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PATTON J BRIAN &
KIMBERLY K BENCKENDORF

494 E 2080 NORTH RD
EDINBURG IL 62531

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$84,494** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-200-009-00	Class 0010	Acreage 23.460	Print Date 9/23/2024	2023 Taxes: \$ 4,139.12		ESTIMATED	2024 Taxes: \$ 4,462.57	
Legal Description SE1/4 NE1/4 EX W545.5' 1995R02690 150425.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	28,878	0	50,289	0	79,167		
	2024	28,457	0	56,037	0	84,494		

Land Fair Cash Val: 85,371 Building Fair Cash Val: 168,111 **Non-Farm Value: 253,482**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-200-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-200-010-00 2058 N 475 EAST RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GROSSNICKLE LEAH A & RICHARD

Address to send notice if different than shown at left:

2058 N 475 EAST RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$43,363** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-200-010-00	Class 0010	Acreage 7.970	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description W361.5 SE1/4 NE1/4 EX N361.5 2003R08200 MHRE 150430.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	17,823	0	21,587	0	39,410	
	2024	17,563	0	25,800	0	43,363	

Land Fair Cash Val: 52,689 Building Fair Cash Val: 77,400 **Non-Farm Value: 130,089**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled 70-100% Ve	32095
	IMPROVEMENT	1315
2024	OWNER OCCUPD	6000
	Disabled 70-100% Ve	37363

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1991	\$26,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-200-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-300-001-00 412 E 2050 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

TRUAX CHARLES W

Address to send notice if different than shown at left:

412 E 2050 NORTH RD
EDINBURG IL 62531

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$121,670 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-07-20-300-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Includes entry for ELDERLY OWNER OCCUPD.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Date Sold, Sale Price, Doc#, Qualified? under Sales History header.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-300-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAMBACHER PUCETTI FARMS INC

957 E 1500 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,424** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-300-002-00	Class 0021	Acreage 38.317	Print Date 9/23/2024	2023 Taxes: \$ 1,859.74		ESTIMATED	2024 Taxes: \$ 1,968.79
Legal Description NE1/4 SW1/4 EX 1.683AC FOR COUNTY HIGHWAY 20 1993R04321 150434.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	30,628	0	0	30,628	
	2024	0	32,424	0	0	32,424	

15-07-20-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/17/2023	\$650,000	2023R00139	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-300-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-20-300-003-00	Class 9900	Acreage 64.280	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description PART S1/2 SW1/4 ST DOC# 98-11-10 150435.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-07-20-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-300-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCE
OJRP 16 OFFICE REALTY AND ENV PLANNING

701 E CARY ST
RICHMOND VA 23219

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-20-300-004-00	Class 9900	Acreage 45.847	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description SE1/4 SW1/4 1998R01242 150435.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-07-20-300-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-300-004-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,656** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-300-004-01	Class 0083	Acreage 1.773	Print Date 9/23/2024	2023 Taxes: \$ 97.64		ESTIMATED 2024 Taxes: \$ 100.55	
Legal Description SANGCHRIS LAKE PART W1/2 SW1/4 1998R01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,608	0	0	0	1,608	
	2024	1,656	0	0	0	1,656	

Land Fair Cash Val: 4,968 Building Fair Cash Val: 0 **Non-Farm Value: 4,968**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-300-004-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LANGHEIM REESE

Address to send notice if different than shown at left:

PO BOX 297
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,467** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-20-400-001-00	Class 0021	Acreage 33.550	Print Date 9/23/2024	2023 Taxes: \$ 1,043.72		ESTIMATED	2024 Taxes: \$ 1,121.32
Legal Description NW1/4 SE1/4 EX BEG NW COR NE1/4 SE1/4 W536.57 S49.92 E97 SE451.90 S405 E238 N887 TO POB 150438.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	17,189	0	0	17,189	
	2024	0	18,467	0	0	18,467	

15-07-20-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
09/08/2016	\$540,000	2016R03323	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-400-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LANGHEIM REESE

Address to send notice if different than shown at left:

PO BOX 297
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,935** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-20-400-002-00	Class 0021	Acreage 61.360	Print Date 9/23/2024	2023 Taxes: \$ 1,102.08		ESTIMATED		2024 Taxes: \$ 1,210.46
Legal Description PART S OF CREEK E1/2 SE1/4 EX BEG NW COR NE1/4 SE1/4 E337.54 SE635.31 SSW482.10 W731(APPROX) N887(APPROX) TO POB 150440.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	18,150	0	0	18,150		
	2024	0	19,935	0	0	19,935		

15-07-20-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/08/2016	\$540,000	2016R03323	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-400-002-01 468 E 2050 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LANGHEIM WILLIAM & KATHYE S

Address to send notice if different than shown at left:

468 E 2050 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$130,630** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-400-002-01	Class 0010	Acreage 20.085	Print Date 9/23/2024	2023 Taxes: \$ 6,674.50		ESTIMATED	2024 Taxes: \$ 6,752.81
Legal Description BEG NW COR NE1/4 SE1/4 E337.54 SE635.31 SSW482.10 W969.97 N405 NW451.90 W97 N49.92 E536.57 TO POB 150440.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	26,466	0	111,264	0	137,730	
	2024	26,080	0	104,550	0	130,630	

Land Fair Cash Val: 78,240 Building Fair Cash Val: 313,650 **Non-Farm Value: 391,890**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	IMPROVEMENT	1290
	ELDERLY	5000
	SEN FREEZE	15518
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	8418

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-400-002-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-400-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF EDINBURG

Address to send notice if different than shown at left:

PO BOX 350
EDINBURG

IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,595** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-20-400-003-00	Class 0021	Acreage 5.000	Print Date 9/23/2024	2023 Taxes: \$ 89.14		ESTIMATED 2024 Taxes: \$ 96.85	
Legal Description PART N OF CREEK E1/2 SE1/4 1987R23974 150439.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	1,468	0	0	1,468	
	2024	0	1,595	0	0	1,595	

15-07-20-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-400-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BAKER BRIAN E

Address to send notice if different than shown at left:

8211 BRANER RD
ROCHESTER IL 62563

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,072** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-20-400-004-00	Class 0021	Acreage 37.000	Print Date 9/23/2024	2023 Taxes: \$ 1,361.66		ESTIMATED		2024 Taxes: \$ 1,461.66
Legal Description SW1/4 SE1/4 EX W350' E735' S420' 1972R05478 150437.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	22,425	0	0	22,425		
	2024	0	24,072	0	0	24,072		

15-07-20-400-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-400-005-00 467 E 2000 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COMFORT MARY M &
MICHAEL E BELL

467 E 2000 NORTH RD
EDINBURG IL 62531

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$46,236** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-07-20-400-005-00	Class 0010	Acreage 3.000	Print Date 9/23/2024	2023 Taxes: \$ 359.28	ESTIMATED			2024 Taxes: \$ 1,272.21
Legal Description W350' E735' S420' SW1/4 SE1/4 2004R02833 150436.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	11,420	0	26,097	0	37,517		
	2024	11,253	0	34,983	0	46,236		

Land Fair Cash Val: 33,759 Building Fair Cash Val: 104,949 **Non-Farm Value: 138,708**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	SEN FREEZE	5565
	IMPROVEMENT	15035
2024	ELDERLY	5000
	SEN FREEZE	14284

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/2000	\$85,000		Yes
01/24/2005	\$85,000	2005R00409	Yes
03/26/2008	\$68,222	2008R01500	No
11/17/2008	\$0	2008R05785	No
05/16/2016	\$50,000	2016R01759	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-20-400-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-750-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

E O R ENERGY LLC

Address to send notice if different than shown at left:

14 LAKESIDE LN
DENVER CO 80212

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-750-001-00	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LEASE WORKING INT RINK LSE NW1/4 NW1/4 158289.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-07-20-750-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-20-750-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

E O R ENERGY LLC

Address to send notice if different than shown at left:

14 LAKESIDE LN
DENVER CO 80212

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-20-750-002-00	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LEASE ROYALTY INT RINK LSE NW1/4 NW1/4 158290.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-07-20-750-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-21-100-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRUAX CHARLES W ET AL

Address to send notice if different than shown at left:

412 E 2050 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,902** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-21-100-001-00	Class 0021	Acreage 49.370	Print Date 9/23/2024	2023 Taxes: \$ 1,054.84		ESTIMATED	2024 Taxes: \$ 1,147.73
Legal Description NW1/4 NW1/4 & PART N1/2 NE1/4 NW1/4 W OF RIVER & EX 1.63AC 1997R01979 150444.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	17,372	0	0	17,372	
	2024	0	18,902	0	0	18,902	

15-07-21-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-21-100-001-01 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

WATSON DAVID D &
CHERYL MANFREDO

222 N DANIEL AVE
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property,
appeals this assessment of said property at \$3,440 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 10,320 Building Fair Cash Val: 0 Non-Farm Value: 10,320

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 03/29/2005, \$35,000, 2005R01752, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-07-21-100-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-21-100-003-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

RAGLAND WILLIAM P & ROSE M

Address to send notice if different than shown at left:

1930 N 600 EAST RD
EDINBURG IL 62531

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$798 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-07-21-100-003-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-21-100-004-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

POWDER PUFF FARMS

Address to send notice if different than shown at left:

PO BOX 982
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,566** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-21-100-004-00	Class 0021	Acreage 100.000	Print Date 9/23/2024	2023 Taxes: \$ 2,238.64		ESTIMATED		2024 Taxes: \$ 2,463.18
Legal Description S3/4 E1/2 NW1/4 & SW1/4 NW1/4 BK308 PG593 150443.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	36,868	0	0	36,868		
	2024	0	40,566	0	0	40,566		

15-07-21-100-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-21-300-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF EDINBURG

Address to send notice if different than shown at left:

PO BOX 350
EDINBURG

IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,034** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-21-300-001-00	Class 0021	Acreage 15.000	Print Date 9/23/2024	2023 Taxes: \$ 334.94		ESTIMATED	2024 Taxes: \$ 366.39
Legal Description THAT PART W1/2 SW1/4 LY N OF RIVER 1987R23974 150448.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	5,516	0	0	5,516	
	2024	0	6,034	0	0	6,034	

15-07-21-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-21-300-002-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

POWDER PUFF FARMS

Address to send notice if different than shown at left:

PO BOX 982
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,871** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-21-300-002-00	Class 0021	Acreage 13.000	Print Date 9/23/2024	2023 Taxes: \$ 156.84		ESTIMATED		2024 Taxes: \$ 174.33
Legal Description THAT PART E1/2 SW1/4 LY N OF RIVER 150447.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	2,583	0	0	2,583		
	2024	0	2,871	0	0	2,871		

15-07-21-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-21-300-003-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

TRUAX CHARLES W JR

Address to send notice if different than shown at left:

412 E 2050 NORTH RD
EDINBURG IL 62531

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$72,463 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-07-21-300-003-00

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-21-700-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

COMMONWEALTH EDISON CO
% REAL ESTATE DEPT
4TH FL
3 LINCOLN CTR
OAKBROOK TERRACE IL 60181

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$2,120 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-07-21-700-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-21-750-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOMCO LTD

Address to send notice if different than shown at left:

PO BOX 19246
SPRINGFIELD

IL 62794

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-21-750-001-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LEASE WORKING INT CASS LEASE S1/2 NW1/4 NW1/4 158031.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-07-21-750-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-21-750-002-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

TRUAX CHARLES W & CHARLES W TRUAX JR

412 E 2050 NORTH RD EDINBURG IL 62531

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$0 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-07-21-750-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-100-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRUAX CHARLES W
% ELTA TRUAX

412 E 2050 NORTH RD
EDINBURG IL 62531

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,731** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-28-100-001-00	Class 0021	Acreage 58.080	Print Date 9/23/2024	2023 Taxes: \$ 1,716.14		ESTIMATED	2024 Taxes: \$ 1,865.99
Legal Description N58.08AC W148AC N196AC W1/2 EX S255' E358' 1990R00970 150457.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	28,263	0	0	28,263	
	2024	0	30,731	0	0	30,731	

15-07-28-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-100-004-00 1968 N 500 EAST RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILLHOFF GARRY W

Address to send notice if different than shown at left:

1968 N 500 EAST RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$68,310** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-28-100-004-00	Class 0011	Acreage 30.170	Print Date 9/23/2024	2023 Taxes: \$ 3,512.92	ESTIMATED			2024 Taxes: \$ 3,783.48
Legal Description BEG NW COR NE1/4 N716.08' N612.14' E1641.05' N255' E358' S866.74' W1998.90' 1993R04995 150457.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	12,724	12,082	39,723	0	64,529		
	2024	12,540	12,987	42,783	0	68,310		

15-07-28-100-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 675
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1993	\$120,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-100-005-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRUAX CHARLES W

Address to send notice if different than shown at left:

412 E 2050 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,021** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-28-100-005-00	Class 0021	Acreage 32.000	Print Date 9/23/2024	2023 Taxes: \$ 1,129.64		ESTIMATED	2024 Taxes: \$ 1,215.68
Legal Description S32.00AC W3/4 NW1/4 1984R04772 150456.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	18,604	0	0	18,604	
	2024	0	20,021	0	0	20,021	

15-07-28-100-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-100-006-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRUAX CHARLES W JR

Address to send notice if different than shown at left:

412 E 2050 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,139** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-28-100-006-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,659.92		ESTIMATED 2024 Taxes: \$ 1,769.33	
Legal Description E1/2 E1/2 NW1/4 1974R12795 150453.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	27,337	0	0	27,337	
	2024	0	29,139	0	0	29,139	

15-07-28-100-006-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/12/2024	\$399,667	2024R02735	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-200-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRUAX CHARLES W JR

Address to send notice if different than shown at left:

412 E 2050 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,016** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-28-200-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,303.12		ESTIMATED		2024 Taxes: \$ 1,397.54
Legal Description N1/2 NW1/4 NE1/4 & W20.00AC S3/4 W1/2 NE1/4 150453.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	21,461	0	0	21,461		
	2024	0	23,016	0	0	23,016		

15-07-28-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/12/2024	\$399,667	2024R02735	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-200-002-00 1995 N 600 EAST RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BROOKENS LARRY & JACKIE

Address to send notice if different than shown at left:

1995 N 600 EAST RD
EDINBURG IL 62531

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$53,270 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 27,759 Building Fair Cash Val: 132,051 Non-Farm Value: 159,810

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows 6000 for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows sales history from 2002 to 2012.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-07-28-200-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-200-003-00 1983 N 600 EAST RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WALKER MICHAEL K & TAMMY S

Address to send notice if different than shown at left:

1983 N 600 EAST RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$80,967** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-28-200-003-00	Class 0010	Acreage 10.120	Print Date 9/23/2024	2023 Taxes: \$ 4,496.10		ESTIMATED		2024 Taxes: \$ 4,552.01
Legal Description BEG NE COR NE1/4 NE1/4 S332.57' POB S332.57' W1326.40' N331.80' E1326.67' TO THE BEG 2001R00332 150452.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	19,271	0	60,775	0	80,046		
	2024	18,990	0	61,977	0	80,967		

Land Fair Cash Val: 56,970 Building Fair Cash Val: 185,931 **Non-Farm Value: 242,901**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/2001	\$115,000		Yes
12/12/2013	\$195,000	2013R05457	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-28-200-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-200-004-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BECKHAM KENNETH STEVE

Address to send notice if different than shown at left:

1977 N 600 EAST RD
EDINBURG IL 62531

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$3,720 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-07-28-200-004-00

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Exemption History Amount
Tax Year

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 05/25/2007, \$142,422, 2007R02566, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-200-004-01 1985 N 600 EAST RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAUM GARY G SR TRUSTEE

1208 SPRINGFIELD ST
PO BOX 375
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$420** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-28-200-004-01	Class 0021	Acreage 4.000	Print Date 9/23/2024	2023 Taxes: \$ 23.62	ESTIMATED			2024 Taxes: \$ 25.50
Legal Description E1/2 SE1/4 NE1/4 LY W OF THE CENTER THREAD SOUTH FORK OF THE SANGAMON RIVER 2001R08487	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	389	0	0	389		
	2024	0	420	0	0	420		

15-07-28-200-004-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/2001	\$3,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-200-004-02 1977 N 600 EAST RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BECKHAM KENNETH STEVE

Address to send notice if different than shown at left:

1977 N 600 EAST RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$74,848** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-28-200-004-02	Class 0011	Acreage 15.990	Print Date 9/23/2024	2023 Taxes: \$ 3,967.70		ESTIMATED	2024 Taxes: \$ 3,876.86
Legal Description S1/2 NE1/4 NE1/4 EX THAT PART LY W OF SOUTH FORK SANGAMON RIVER & N442' E1/2 SE1/4 NE1/4 2001R08101	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	10,349	2,478	43,517	20,000	76,344	
	2024	10,200	2,808	41,840	20,000	74,848	

15-07-28-200-004-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-200-005-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRUAX CHARLES W

Address to send notice if different than shown at left:

412 E 2050 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$37,881** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-28-200-005-00	Class 0021	Acreage 60.000	Print Date 9/23/2024	2023 Taxes: \$ 2,142.22		ESTIMATED	2024 Taxes: \$ 2,300.14
Legal Description E40.00AC S3/4 W1/2 NE1/4 & W1/2 SE1/4 NE1/4 1985R07770 150454.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	35,280	0	0	35,280	
	2024	0	37,881	0	0	37,881	

15-07-28-200-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-200-006-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRUAX CHARLES

Address to send notice if different than shown at left:

412 E 2050 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$414** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-28-200-006-00	Class 0021	Acreage 4.000	Print Date 9/23/2024	2023 Taxes: \$ 23.32		ESTIMATED		2024 Taxes: \$ 25.14
Legal Description LY W OF SOUTH FORK OF THE SANGAMON RIVER S1/2 NE1/4 NE1/4 BK343 PG150 150454.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	384	0	0	384		
	2024	0	414	0	0	414		

15-07-28-200-006-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-300-001-00 507 E 1940 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRUAX CHARLES

Address to send notice if different than shown at left:

412 E 2050 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,807** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-28-300-001-00	Class 0011	Acreage 27.380	Print Date 9/23/2024	2023 Taxes: \$ 2,145.44		ESTIMATED	2024 Taxes: \$ 2,356.37
Legal Description N27.38AC W3/4 SW1/4 1984R04772 150456.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,713	13,643	17,477	500	35,333	
	2024	3,657	14,730	19,420	1,000	38,807	

15-07-28-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-300-002-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRUAX CHARLES W JR

Address to send notice if different than shown at left:

412 E 2050 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,506** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-28-300-002-00	Class 0021	Acreage 8.000	Print Date 9/23/2024	2023 Taxes: \$ 252.90		ESTIMATED		2024 Taxes: \$ 273.61
Legal Description 8.00AC NE COR SW1/4 150453.002	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	4,165	0	0	4,165		
	2024	0	4,506	0	0	4,506		

15-07-28-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/12/2024	\$399,667	2024R02735	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-300-003-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HART KAREN TRUSTEE

Address to send notice if different than shown at left:

3128 GOSHEN DR
OKLAHOMA CITY OK 73120

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$82,229** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-28-300-003-00	Class 0021	Acreage 124.570	Print Date 9/23/2024	2023 Taxes: \$ 4,662.96		ESTIMATED	2024 Taxes: \$ 4,992.96
Legal Description S124.57AC W1/2 1986R15501 150458.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	76,794	0	0	76,794	
	2024	0	82,229	0	0	82,229	

15-07-28-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-400-001-00 567 E 1900 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BECKEY DOUGLAS ALAN
% DIANE K RUFFNER TRUSTEE

135 TRUMAN RD
EDWARDS MO 65326

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$123,371 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for Year, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-07-28-400-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount. Rows for Tax Year 2023 and 2024, both showing OWNER OCCUPD with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes handwritten initials Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-400-001-01 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COURTNEY TOM & ANGIE

Address to send notice if different than shown at left:

7580 KUNZ RD
ROCHESTER IL 62563

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,318** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-28-400-001-01	Class 0011	Acreage 6.420	Print Date 9/23/2024	2023 Taxes: \$ 487.70	ESTIMATED			2024 Taxes: \$ 505.07
Legal Description N700' E400' W3/4 SE1/4 2000R02278	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,141	829	5,062	0	8,032		
	2024	2,110	931	5,277	0	8,318		

15-07-28-400-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/22/2012	\$35,000	2012R02787	No
07/23/2012	\$40,000	2012R04091	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-400-002-00 1930 N 600 EAST RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RAGLAND WILLIAM P & ROSE M

Address to send notice if different than shown at left:

1930 N 600 EAST RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$72,627** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-28-400-002-00	Class 0011	Acreage 26.000	Print Date 9/23/2024	2023 Taxes: \$ 3,641.76		ESTIMATED		2024 Taxes: \$ 3,742.00
Legal Description E1/2 N13/20 E1/2 SE1/4 1996R03478 150460.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	14,824	6,783	46,369	3,000	70,976		
	2024	14,610	7,327	47,690	3,000	72,627		

15-07-28-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-400-003-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TANNER TRAVIS & MEGAN

801 BORAH AVE
PO BOX 93
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,056** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-28-400-003-00	Class 0010	Acreage 1.746	Print Date 9/23/2024	2023 Taxes: \$ 35.96		ESTIMATED	2024 Taxes: \$ 671.32
Legal Description JANETS MINOR SUBDIV LOT 2 2002R05437 1987R23318 150461.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	592	0	0	592	
	2024	8,593	0	2,463	0	11,056	

Land Fair Cash Val: 25,779 Building Fair Cash Val: 7,389 **Non-Farm Value: 33,168**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2002	\$72,500		Yes
12/02/2015	\$21,500	2015R04676	No
12/20/2022	\$30,000	2022R04545	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-28-400-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-400-003-01 587 E 1900 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

KLEBE ROBERT F

Address to send notice if different than shown at left:

587 E 1900 NORTH RD
EDINBURG IL 62531

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$28,331 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024 valuations.

Land Fair Cash Val: 26,670 Building Fair Cash Val: 58,323 Non-Farm Value: 84,993

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Includes entry for OWNER OCCUPD with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes sales history for 08/25/2006 and 12/18/2023.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-07-28-400-003-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-400-005-00 589 E 1900 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BREIDENBAUGH THOMAS C CO TRUSTEE
ROSEMARY E BREIDEBAUGH CO TRUSTEE

589 E 1900 NORTH RD
EDINBURG IL 62531

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$17,237 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024 valuations.

Land Fair Cash Val: 24,861 Building Fair Cash Val: 26,850 Non-Farm Value: 51,711

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-07-28-400-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-700-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

COMMONWEALTH EDISON CO
% REAL ESTATE DEPT
4TH FL
3 LINCOLN CTR
OAKBROOK TERRACE IL 60181

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$7,570 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-07-28-700-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-750-003-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOMCO LTD

Address to send notice if different than shown at left:

PO BOX 19246
SPRINGFIELD

IL 62794

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-28-750-003-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE WKG INT PEABODY LSE NO 25 & 27 LSE 3088 158371.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-07-28-750-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-750-004-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEABODY DEVELOPMENT CO
%RICHARD J CARAVIA

701 MARKET ST
SAINT LOUIS MO 63101

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-28-750-004-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE RYLTY INT PEABODY 25 & 27 LSE	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-07-28-750-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-28-750-005-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BI PETRO INC

Address to send notice if different than shown at left:

PO BOX 19246
SPRINGFIELD

IL 62794

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-28-750-005-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description SE1/4 SE1/4 NW1/4 LEASE NAME ELPA TRUAX#1 LEASE #1973	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-07-28-750-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-29-100-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-29-100-001-00	Class 9900	Acreage 215.340	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description PART OF SEC 29 215.34AC ST DOC# 98-11-10 150471.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-07-29-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-29-200-001-00 1985 N 500 EAST RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

FULK HALLIE L JR

Address to send notice if different than shown at left:

1967 N 500 EAST RD
EDINBURG IL 62531

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$47,938 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-07-29-200-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-29-200-001-01 466 E 2000 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FULK HALLIE L JR

Address to send notice if different than shown at left:

1967 N 500 EAST RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,941** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-29-200-001-01	Class 0011	Acreage 2.000	Print Date 9/23/2024	2023 Taxes: \$ 1,152.48		ESTIMATED	2024 Taxes: \$ 1,392.98
Legal Description BEG NW COR E1/2 NW1/4 NE1/4 E295.16' S295.16' W295.16' N295.16' 1996R02312 MHRE	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,931	296	7,753	6,000	18,980	
	2024	4,860	321	11,760	6,000	22,941	

15-07-29-200-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-29-200-002-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FULK HALLIE L JR

Address to send notice if different than shown at left:

1967 N 500 EAST RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-29-200-002-00	Class 0011	Acreage 18.080	Print Date 9/23/2024	2023 Taxes: \$ 1,173.78		ESTIMATED	2024 Taxes: \$ 1,220.48
Legal Description S1/2 SE1/4 NE1/4 EX BEG SE COR SE1/4 NE1/4 W282.94' N308.19' E280.23' S311.44' TO POB 1989R09282 150463.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	11,331	0	8,000	19,331	
	2024	0	12,100	0	8,000	20,100	

15-07-29-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
04/10/2008	\$230,000	2008R01847	No
07/23/2012	\$136,875	2012R04092	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-29-200-002-01 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FULK HALLIE L JR

Address to send notice if different than shown at left:

1967 N 500 EAST RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,330** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-29-200-002-01	Class 0021	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 935.88		ESTIMATED		2024 Taxes: \$ 991.56
Legal Description N1/2 SE1/4 NE1/4 1989R09282 150463.001		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	15,413	0	0	15,413	
		2024	0	16,330	0	0	16,330	

15-07-29-200-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1987	\$30,000		Yes
03/05/2009	\$236,562	2009R01277	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-29-200-002-02 1967 N 500 EAST RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FULK HALLIE L JR

Address to send notice if different than shown at left:

1967 N 500 EAST RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$88,567** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-07-29-200-002-02	Class 0010	Acreage 2.020	Print Date 9/23/2024	2023 Taxes: \$ 5,225.22		ESTIMATED		2024 Taxes: \$ 5,013.48
Legal Description BEG SE COR SE1/4 NE1/4 W282.94' N308.19' E280.23' S311.44' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,319	0	82,735	0	92,054		
	2024	9,187	0	79,380	0	88,567		

Land Fair Cash Val: 27,561 Building Fair Cash Val: 238,140 **Non-Farm Value: 265,701**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/23/2012	\$228,125	2012R04094	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-29-200-002-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-29-300-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$212,774** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-29-300-001-00	Class 0083	Acreage 272.660	Print Date 9/23/2024	2023 Taxes: \$ 12,543.40		ESTIMATED		2024 Taxes: \$ 12,919.68
Legal Description PART OF SEC 29 272.66AC THIS IS SANGCHRIS LAKE 1998R01242 ST DOC# 98-11-10 150470.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	206,577	0	0	0	206,577		
	2024	212,774	0	0	0	212,774		

Land Fair Cash Val: 638,322 Building Fair Cash Val: 0 **Non-Farm Value: 638,322**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-29-300-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-29-400-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HART KAREN TRUSTEE

Address to send notice if different than shown at left:

3128 GOSHEN DR
OKLAHOMA CITY OK 73120

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$39,250** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-29-400-001-00	Class 0021	Acreage 52.000	Print Date 9/23/2024	2023 Taxes: \$ 2,237.60		ESTIMATED	2024 Taxes: \$ 2,383.27
Legal Description E52.00AC SE1/4 1986R15501 150476.000		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL
		2023	0	36,851	0	0	36,851
		2024	0	39,250	0	0	39,250

15-07-29-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-29-750-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LLA EXPLORATION INC

Address to send notice if different than shown at left:

1747 N 800 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$667** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-29-750-001-00	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 40.50	ESTIMATED			2024 Taxes: \$ 40.50
Legal Description OIL LSE WORKING INT NORTH KINCAID UNIT SEC 29 & 32 1991R04871 158240.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	667	0	667		
	2024	0	0	667	0	667		

15-07-29-750-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-29-750-002-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEABODY DEVELOPMENT CO
%RICHARD J CARAVIA

701 MARKET ST
SAINT LOUIS MO 63101

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-29-750-002-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description OIL LEASE ROYALTY INT NORTH KINCAID FLOOD SEC 29 14 3W 158241.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0		
	2024	0	0	0	0	0		

15-07-29-750-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-29-750-005-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

GLENN CHERYL K

RR 1 BOX 376

BENTON

IL 62812

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$0 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-07-29-750-005-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four tick marks for valuation input.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-30-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT
PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$228,388 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 685,164 Building Fair Cash Val: 0 Non-Farm Value: 685,164

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-07-30-100-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-30-100-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-30-100-002-00	Class 9900	Acreage 201.380	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description 201.38AC SEC 30 FARM LEASE PARCEL (ALL LAND) ST DOC# 98-11-10 150485.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-07-30-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-31-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$204,267** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-31-100-001-00	Class 0083	Acreage 320.140	Print Date 9/23/2024	2023 Taxes: \$ 12,041.86		ESTIMATED		2024 Taxes: \$ 12,403.13
Legal Description ALL FRAC SEC EX 239.86AC TO STATE OF IL 1998R01242 ST DOC# 98-11-10 150486.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	198,317	0	0	0	198,317		
	2024	204,267	0	0	0	204,267		

Land Fair Cash Val: 612,801 Building Fair Cash Val: 0 **Non-Farm Value: 612,801**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-31-100-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-31-100-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$770** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-31-100-001-01	Class 0021	Acreage 6.515	Print Date 9/23/2024	2023 Taxes: \$ 43.66	ESTIMATED			2024 Taxes: \$ 46.75
Legal Description FARM TRACT 10 E1/2 SE1/4 LY E OF SANGCHRIS LAKE 1998R01986	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	719	0	0	719		
	2024	0	770	0	0	770		

15-07-31-100-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-31-100-001-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAM FAMILY LP

Address to send notice if different than shown at left:

2356 W BOARMAN RD
DIVERNON IL 62530

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$46,868** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-31-100-001-02	Class 0021	Acreage 70.502	Print Date 9/23/2024	2023 Taxes: \$ 2,672.60		ESTIMATED	2024 Taxes: \$ 2,845.83
Legal Description FARM TRACT #36 PART S1/2 1998R07610	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	44,015	0	0	44,015	
	2024	0	46,868	0	0	46,868	

15-07-31-100-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/26/2012	\$5,170,000	2012R07047	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-31-100-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-31-100-002-00	Class 9900	Acreage 239.860	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description PRT FRAC SEC 239.86AC FARM LEASE PARCEL ST DOC# 98-11-10 150487.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-07-31-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-31-100-002-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WEST BRENT

Address to send notice if different than shown at left:

PO BOX 294
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$363,542** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-31-100-002-01	Class 0021	Acreage 470.700	Print Date 9/23/2024	2023 Taxes: \$ 20,734.74		ESTIMATED		2024 Taxes: \$ 22,074.34
Legal Description STATE OF ILLINOIS LEASE 470.70CRES LEASED GROUND 150471,485,487 LEASE 2217 150703.002	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	341,480	0	0	341,480		
	2024	0	363,542	0	0	363,542		

15-07-31-100-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-32-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$106,536 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 319,608 Building Fair Cash Val: 0 Non-Farm Value: 319,608

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-07-32-100-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-32-100-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,527** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-32-100-001-01	Class 0021	Acreage 44.256	Print Date 9/23/2024	2023 Taxes: \$ 941.48	ESTIMATED			2024 Taxes: \$ 1,003.52
Legal Description FARM TRACT #10 PART NW1/4 1998R01986	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	15,505	0	0	15,505		
	2024	0	16,527	0	0	16,527		

15-07-32-100-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-32-100-001-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HILL DIANNE

2625 E LOST BRIDGE RD
 DECATUR IL 62521

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,648** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-32-100-001-02	Class 0021	Acreage 27.342	Print Date 9/23/2024	2023 Taxes: \$ 830.60		ESTIMATED	2024 Taxes: \$ 889.43
Legal Description FARM TRACT #5 BEG SE COR NE1/4 N1289.38' W1296.09' S390.20' W394.29' S353.28' S32.35' TO SANGCHRIS LAKE FOLLOW ALONG LAKE PROPERTY E TO	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	13,679	0	0	13,679	
	2024	0	14,648	0	0	14,648	

15-07-32-100-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
11/01/2007	\$240,858	2007R05333	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-32-100-001-03 474 E 1865 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KURLAKOWSKY MIKE & KATELYN P

Address to send notice if different than shown at left:

474 E 1865 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$71,686** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-32-100-001-03	Class 0010	Acreage 10.569	Print Date 9/23/2024	2023 Taxes: \$ 3,820.46		ESTIMATED		2024 Taxes: \$ 3,988.47
Legal Description BEG NW COR SE1/4 NE1/4 E33.01' S33.01' TO POB E455.67' S202.26' TO POINT ON WATERS EDGE OF SANGCHRIS LAKE TH SOUTHERLY & WESTERLY ALONG 585	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	19,668	0	49,251	0	68,919		
	2024	19,383	0	52,303	0	71,686		

Land Fair Cash Val: 58,149 Building Fair Cash Val: 156,909 **Non-Farm Value: 215,058**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/02/2006	\$57,750	2006R02124	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-32-100-001-03

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-32-200-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-32-200-001-00	Class 9900	Acreage 76.120	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description 76.12AC IN SEC 32 ST DOC# 98-11-10 150491.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-07-32-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-32-200-002-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SOUTH FORK TOWNSHIP

Address to send notice if different than shown at left:

PO BOX 258
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-32-200-002-00	Class 9900	Acreage 5.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description S1/4 OF NE1/4 ST DOC# 87-11-29 150493.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	
	2024	0	0	0	0	0	0	

15-07-32-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-32-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,054** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-32-300-001-00	Class 0083	Acreage 34.690	Print Date 9/23/2024	2023 Taxes: \$ 1,889.62		ESTIMATED		2024 Taxes: \$ 1,946.33
Legal Description SANGCHRIS LAKE SW1/4 1998R01242 150490.000		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	31,120	0	0	0	31,120	
		2024	32,054	0	0	0	32,054	

Land Fair Cash Val: 96,162 Building Fair Cash Val: 0 **Non-Farm Value: 96,162**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-32-300-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-32-300-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$82,721** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-32-300-001-01	Class 0021	Acreage 125.310	Print Date 9/23/2024	2023 Taxes: \$ 4,737.10		ESTIMATED	2024 Taxes: \$ 5,022.84
Legal Description FARM TRACT #10 PART SW1/4 1998R01986	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	78,015	0	0	78,015	
	2024	0	82,721	0	0	82,721	

15-07-32-300-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-32-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$76,461** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-32-400-001-00	Class 0083	Acreage 82.777	Print Date 9/23/2024	2023 Taxes: \$ 4,507.50		ESTIMATED	2024 Taxes: \$ 4,642.73
Legal Description SANGCHRIS LAKE SE1/4 1998R01242 150492.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	74,234	0	0	0	74,234	
	2024	76,461	0	0	0	76,461	

Land Fair Cash Val: 229,383 Building Fair Cash Val: 0 **Non-Farm Value: 229,383**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-32-400-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-32-400-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,862** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-32-400-001-01	Class 0021	Acreage 18.666	Print Date 9/23/2024	2023 Taxes: \$ 162.92		ESTIMATED 2024 Taxes: \$ 173.78	
Legal Description FARM TRACT #10 PART W1/2 SE1/4 1998R01986	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	2,683	0	0	2,683	
	2024	0	2,862	0	0	2,862	

15-07-32-400-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-32-400-001-02 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DMJJ FARMS INC

Address to send notice if different than shown at left:

9750 OLD ROUTE 66
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,680** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-32-400-001-02	Class 0021	Acreage 11.609	Print Date 9/23/2024	2023 Taxes: \$ 267.78		ESTIMATED	2024 Taxes: \$ 284.17
Legal Description FARM TRACT #13 SE1/4 SE1/4 LY S&E SANGCHRIS LAKE 1998R02109	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	4,410	0	0	4,410	
	2024	0	4,680	0	0	4,680	

15-07-32-400-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-32-400-001-03 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HILL DIANNE

2625 E LOST BRIDGE RD
 DECATUR IL 62521

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,788** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-32-400-001-03	Class 0021	Acreage 30.005	Print Date 9/23/2024	2023 Taxes: \$ 1,016.46		ESTIMATED	2024 Taxes: \$ 1,080.09
Legal Description FARM TRACT #15 SE1/4 LY N & E SANGCHRIS LAKE EX FOR 15.943ACRES & EX E80.01' NE1/4 SE1/4 2004R01848 1998R02161	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	16,740	0	0	16,740	
	2024	0	17,788	0	0	17,788	

15-07-32-400-001-03

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
11/01/2007	\$240,858	2007R05333	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-32-400-001-04 BULPITT

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

PATTERSON ZACKERY M & JACQUELYN A

Address to send notice if different than shown at left:

11665 WAYSIDE MEADOWS RD
GLENARM IL 62536

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$7,602 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-07-32-400-001-04

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Exemption History Amount Tax Year

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Includes rows for 04/21/2005, 03/29/2012, 03/09/2022)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-33-100-001-00 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HART KAREN TRUSTEE

Address to send notice if different than shown at left:

3128 GOSHEN DR
OKLAHOMA CITY OK 73120

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$58,633** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-33-100-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,338.58		ESTIMATED	2024 Taxes: \$ 3,560.21
Legal Description W1/2 NW1/4 1986R15501 150501.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	54,983	0	0	54,983	
	2024	0	58,633	0	0	58,633	

15-07-33-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-33-100-002-00 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HART KAREN GST SEPARATE TRUST
%KAREN HART TRUSTEE

3128 GOSHEN DR
OKLAHOMA CITY OK 73120

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$55,748** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-33-100-002-00	Class 0021	Acreage 76.000	Print Date 9/23/2024	2023 Taxes: \$ 3,171.78		ESTIMATED	2024 Taxes: \$ 3,385.03
Legal Description E1/2 NW1/4 EX E1/20 1989R10552 150502.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	52,236	0	0	52,236	
	2024	0	55,748	0	0	55,748	

15-07-33-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/19/2021	\$888,000	2021R00643	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-33-200-001-00 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DMJJ FARMS INC
%DONNA EIKE
9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$74,240** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-33-200-001-00	Class 0021	Acreage 108.900	Print Date 9/23/2024	2023 Taxes: \$ 4,218.78		ESTIMATED	2024 Taxes: \$ 4,507.87
Legal Description NE1/4 NE1/4 & W1/2 NE1/4 & E1/20 E1/2 NW1/4 EX BEG NE COR NE1/4 W1015.22' POB S660' W996.60' N660' E996.60' TO THE POB 1995R04873 150500.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	69,479	0	0	69,479	
	2024	0	74,240	0	0	74,240	

15-07-33-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-33-200-001-01 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TROST ROBERT W & JEWELL E

APT 106
4101 W ILES AVE
SPRINGFIELD IL 62711

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,796** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-33-200-001-01	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,819.42		ESTIMATED	2024 Taxes: \$ 1,930.66
Legal Description SE1/4 NE1/4 1989R11961 150500.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	29,964	0	0	29,964	
	2024	0	31,796	0	0	31,796	

15-07-33-200-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-33-200-001-02 572 E 1900 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KNEZEVICH ROBERT & KATHY

Address to send notice if different than shown at left:

572 E 1900 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$73,484** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-33-200-001-02	Class 0011	Acreage 15.100	Print Date 9/23/2024	2023 Taxes: \$ 3,295.84		ESTIMATED	2024 Taxes: \$ 3,794.04
Legal Description BEG NE COR NE1/4 W1015.22' POB S660' W996.60' N660' E996.60' TO THE POB 2001R07852	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	8,380	5,280	39,699	12,850	66,209	
	2024	8,257	5,624	46,753	12,850	73,484	

15-07-33-200-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	IMPROVEMENT	930
2024	OWNER OCCUPD	6000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/2001	\$190,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-33-300-001-00 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MSJJJS LLC

Address to send notice if different than shown at left:

9 OAK LN
SPRINGFIELD

IL 62712

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,520** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-33-300-001-00	Class 0021	Acreage 28.009	Print Date 9/23/2024	2023 Taxes: \$ 1,117.26		ESTIMATED	2024 Taxes: \$ 1,185.26
Legal Description FARM TRACT #15 BEG NW COR W1/2 SW1/4 E1327.66' S816.19' TO SANGCHRIS LAKE FOLLOW ALONG SANGCHRIS LAKE PROPERTY	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	18,400	0	0	18,400	
	2024	0	19,520	0	0	19,520	

15-07-33-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
03/25/2008	\$124,950	2008R01471	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-33-300-001-01 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DMJJ FARMS INC

Address to send notice if different than shown at left:

9750 OLD ROUTE 66
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,842** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-33-300-001-01	Class 0021	Acreage 12.680	Print Date 9/23/2024	2023 Taxes: \$ 390.26		ESTIMATED	2024 Taxes: \$ 415.45
Legal Description FARM TRACT #13 PART SW1/4 SW1/4 1998R02109	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	6,427	0	0	6,427	
	2024	0	6,842	0	0	6,842	

15-07-33-300-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-33-300-001-02 541 E 1800 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURTIS DON LLC

UNIT 3157 PMB 304
3941 TAMIAMI TRL
PUNTA GORDA

FL 33950

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$218,463** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-33-300-001-02	Class 0011	Acreage 31.740	Print Date 9/23/2024	2023 Taxes: \$ 12,368.46		ESTIMATED		2024 Taxes: \$ 13,265.12
Legal Description FARM TRACT #14 BEG SE COR W1/2 SW1/4 W219.21' N188.16' TO WATERS EDGE FOLLOW SANGCHRIS TH E52.61' S1833.74' TO BEG	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	20,843	16,516	131,687	34,650	203,696		
	2024	26,163	17,537	140,113	34,650	218,463		

15-07-33-300-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-33-300-001-03 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,348** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-33-300-001-03	Class 0083	Acreage 11.981	Print Date 9/23/2024	2023 Taxes: \$ 610.06		ESTIMATED	2024 Taxes: \$ 628.33
Legal Description W1/2 SW1/4 11.981AC IS FOR SANGCHRIS LAKE 1998R01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	10,047	0	0	0	10,047	
	2024	10,348	0	0	0	10,348	

Land Fair Cash Val: 31,044 Building Fair Cash Val: 0 **Non-Farm Value: 31,044**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-33-300-001-03

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-33-300-002-00 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DMJJ INC
%DEAN DOWSON

9750 OLD ROUTE 66
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$63,776** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-33-300-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,649.34		ESTIMATED	2024 Taxes: \$ 3,872.49
Legal Description E1/2 SW1/4 1987R24157 150501.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	60,101	0	0	60,101	
	2024	0	63,776	0	0	63,776	

15-07-33-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-33-400-001-00 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DMJJ INC
%DEAN DOWSON

9750 OLD ROUTE 66
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,293** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-33-400-001-00	Class 0021	Acreage 33.330	Print Date 9/23/2024	2023 Taxes: \$ 1,446.60		ESTIMATED		2024 Taxes: \$ 1,535.80
Legal Description NW1/4 SE1/4 EX S6 2/3 AC 1987R24157 150509.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	23,824	0	0	23,824		
	2024	0	25,293	0	0	25,293		

15-07-33-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/30/2014	\$1,186,500	2014R04583	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-33-400-002-00 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FULK HALLIE L JR

Address to send notice if different than shown at left:

1967 N 500 EAST RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,453** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-33-400-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,743.10		ESTIMATED		2024 Taxes: \$ 1,849.11
Legal Description NE1/4 SE1/4 150512.000		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	28,707	0	0	28,707	
		2024	0	30,453	0	0	30,453	

15-07-33-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/21/2005	\$295,000	2005R02285	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-33-400-003-00 BULPITT

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MME FARMS LLC

9750 OLD ROUTE 66
PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$54,287 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-07-33-400-003-00

Required

Complainant's Estimated Correct Assessed Valuations:

Four vertical lines for estimated valuations.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 12/02/2022, \$1,338,000, 2022R04342, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-100-001-00 1876 N 600 EAST RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

TUXHORN BEN W & MARY A

Address to send notice if different than shown at left:

3609 HOYLAKE DR
SPRINGFIELD IL 62712

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$149,042 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-07-34-100-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (08/09/2022, \$26,000, 2022R02935, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-100-001-01 628 E 1850 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BLAIR BENJAMIN R

Address to send notice if different than shown at left:

628 E 1850 NORTH RD
EDINBURG IL 62531

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$65,303 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 27,429 Building Fair Cash Val: 168,480 Non-Farm Value: 195,909

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Lists exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows a sale on 09/14/2012 for \$141,000.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-07-34-100-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-100-001-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SNYDER MAURICE & CYNTHIA TAPSCOTT

Address to send notice if different than shown at left:

180 ETHELTON LN
SPRINGFIELD IL 62712

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,877** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-07-34-100-001-02	Class 2028	Acreage 19.000	Print Date 9/23/2024	2023 Taxes: \$ 213.56		ESTIMATED	2024 Taxes: \$ 235.41
Legal Description ALL THAT PART NW1/4 LYING N & E OF CENTER OF SOUTH FORK RIVER	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,517	0	0	0	3,517	
	2024	3,877	0	0	0	3,877	

15-07-34-100-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Exemption History **Amount**
Tax Year

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
07/31/2014	\$190,000	2014R02850	No
09/26/2019	\$257,500	2019R03306	No
08/31/2023	\$300,000	2023R02459	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-200-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TUXHORN BEN W & MARY A

Address to send notice if different than shown at left:

3609 HOYLAKE DR
SPRINGFIELD IL 62712

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$55,198** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-34-200-001-00	Class 0021	Acreage 114.260	Print Date 9/23/2024	2023 Taxes: \$ 3,059.76		ESTIMATED	2024 Taxes: \$ 3,351.63
Legal Description NE1/4 EX W1/4 NE1/4 NE1/4 EX ALL THAT PART OF NE1/4 LYING N & W OF SOUTH FORK RIVER & EX NE1/4 BEG SE COR W1328.79' W1326.13' W489.30' NELY192.28'	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	50,391	0	0	50,391	
	2024	0	55,198	0	0	55,198	

15-07-34-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/09/2022	\$26,000	2022R02935	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-200-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SNYDER MAURICE & CYNTHIA TAPSCOTT

Address to send notice if different than shown at left:

180 ETHERTON LN
SPRINGFIELD IL 62712

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,347** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-07-34-200-001-01	Class 2028	Acreage 17.740	Print Date 9/23/2024	2023 Taxes: \$ 199.28		ESTIMATED	2024 Taxes: \$ 203.23
Legal Description ALL THAT PART OF NE1/4 LYING N & W OF SOUTH FORK RIVER	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,282	0	0	0	3,282	
	2024	3,347	0	0	0	3,347	

15-07-34-200-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Exemption History **Amount**
Tax Year

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
07/31/2014	\$190,000	2014R028520	No
09/26/2019	\$257,500	2019R03306	No
08/31/2023	\$300,000	2023R02459	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-200-001-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DALY LAWRENCE B & JOHN R

Address to send notice if different than shown at left:

1427 N 1025 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,007** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-34-200-001-02	Class 0021	Acreage 19.420	Print Date 9/23/2024	2023 Taxes: \$ 112.70		ESTIMATED 2024 Taxes: \$ 121.87	
Legal Description NE1/4 BEG SE COR W1328.79' W1326.13' W489.30' NELY192.28' NELY277.17' NELY644.51' NELY294.99' SELY320.47' SELY303.64' SELY348.17'	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	1,856	0	0	1,856	
	2024	0	2,007	0	0	2,007	

15-07-34-200-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/09/2022	\$26,000	2022R02935	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-200-002-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

TUXHORN BEN W & MARY A

Address to send notice if different than shown at left:

3609 HOYLAKE DR
SPRINGFIELD IL 62712

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$1,531 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-07-34-200-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Exemption History Amount
Tax Year

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-300-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

FULK HALLIE L JR

Address to send notice if different than shown at left:

1967 N 500 EAST RD
EDINBURG IL 62531

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$12,434 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed breakdown table for 2023 and 2024 valuations by category (HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL).

15-07-34-300-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 04/21/2005, \$295,000, 2005R02285, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-300-002-00 626 E 1850 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SPARKS CARY S & KIMBERLY L

Address to send notice if different than shown at left:

626 E 1850 NORTH RD
EDINBURG IL 62531

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$71,576 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: IMPROVEMENT ADDED, MAY QUALIFY FOR AN IMPROVEMENT EXEMPTION. CHECK WITH BOARD OF REVIEW.

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-07-34-300-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Rows for 2023 and 2024 showing OWNER OCCUPD IMPROVEMENT with amounts 6000 and 17082.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-300-003-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

CTJH FARMS LLC

6301 WIND TREE RD
SPRINGFIELD IL 62712

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$8,496 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-07-34-300-003-00

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 09/08/2014, \$300,000, 2014R03619, No)

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-300-004-00 653 E 1800 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FURGESON DALE G

Address to send notice if different than shown at left:

653 E 1800 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,228** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-34-300-004-00	Class 0011	Acreage 47.500	Print Date 9/23/2024	2023 Taxes: \$ 1,299.36		ESTIMATED		2024 Taxes: \$ 1,774.73
Legal Description SW1/4 SW1/4 & W1/4 SE1/4 SW1/4 EX FOR 2.50AC 2003R06575 MHRE 150526.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,651	10,425	14,323	0	32,399		
	2024	7,540	11,455	21,233	0	40,228		

15-07-34-300-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY OWNER OCCUPD	5000 6000
2024	ELDERLY OWNER OCCUPD	5000 6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1987	\$50,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-300-004-01 1808 N 600 EAST RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FURGESON DALE G

Address to send notice if different than shown at left:

653 E 1800 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,657** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-34-300-004-01	Class 0010	Acreage 2.500	Print Date 9/23/2024	2023 Taxes: \$ 1,625.90		ESTIMATED	2024 Taxes: \$ 1,740.06
Legal Description NW1/4 SW1/4 SW1/4 SW1/ 4 MHRE	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	10,349	0	16,428	0	26,777	
	2024	10,200	0	18,457	0	28,657	

Land Fair Cash Val: 30,600 Building Fair Cash Val: 55,371 **Non-Farm Value: 85,971**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-34-300-004-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-300-005-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FURGESON DALE & BONNIE

Address to send notice if different than shown at left:

653 E 1800 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,462** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-34-300-005-00	Class 0021	Acreage 16.270	Print Date 9/23/2024	2023 Taxes: \$ 305.00		ESTIMATED	2024 Taxes: \$ 331.65
Legal Description ALL THAT PART E3/4 SE1/4 SW1/4 LY S&W OF CREEK 2001R05503 150523.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	5,023	0	0	5,023	
	2024	0	5,462	0	0	5,462	

15-07-34-300-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
03/01/1987	\$10,000		Yes
09/08/2014	\$68,000	2014R03616	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-400-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ORLANDINI JAMES FARMS LLC

PO BOX 6055
SPRINGFIELD IL 62708

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,043** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-34-400-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 763.32		ESTIMATED 2024 Taxes: \$ 852.69	
Legal Description NW1/4 SE1/4 1987R21482 150528.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	12,571	0	0	12,571	
	2024	0	14,043	0	0	14,043	

15-07-34-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/10/2014	\$308,000	2014R04222	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-400-003-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

CTJH FARMS LLC

6301 WIND TREE RD
SPRINGFIELD IL 62712

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$12,167 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 36,501 Building Fair Cash Val: 0 Non-Farm Value: 36,501

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? (Sales History)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-07-34-400-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-400-004-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CTJH FARMS LLC

6301 WIND TREE RD
SPRINGFIELD IL 62712

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,594** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-34-400-004-00	Class 0010	Acreage 6.160	Print Date 9/23/2024	2023 Taxes: \$ 1,314.54		ESTIMATED		2024 Taxes: \$ 1,189.75
Legal Description N1/2 E1/2 SW1/4 SE1/4 EX FOR 3.84AC 1 ACRE HOMESITE IS FOR CABIN 2001R05503 150529.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	12,962	0	8,687	0	21,649		
	2024	11,367	0	8,227	0	19,594		

Land Fair Cash Val: 34,101 Building Fair Cash Val: 24,681 **Non-Farm Value: 58,782**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
09/08/2014	\$300,000	2014R03619	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-34-400-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-400-004-01 671 E 1800 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FURGESON DALE & BONNIE

653 E 1800 NORTH RD
EDINBURG IL 62531

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$66,397** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-34-400-004-01	Class 0010	Acreage 3.840	Print Date 9/23/2024	2023 Taxes: \$ 4,231.84		ESTIMATED	2024 Taxes: \$ 4,031.64
Legal Description BEG NE COR SW1/4 SE1/4 S470.05' NWLY210.44' NWLY122.05' NWLY214.14' NWLY206.71' E478.36' 2001R05502	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	13,220	0	56,474	0	69,694	
	2024	13,027	0	53,370	0	66,397	

Land Fair Cash Val: 39,081 Building Fair Cash Val: 160,110 **Non-Farm Value: 199,191**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/2001	\$85,000		Yes
09/10/2014	\$155,500	2014R03659	No
08/26/2016	\$171,000	2016R03134	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-07-34-400-004-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-400-005-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FURGESON DALE G

Address to send notice if different than shown at left:

653 E 1800 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,456** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-34-400-005-00	Class 0021	Acreage 12.700	Print Date 9/23/2024	2023 Taxes: \$ 82.52		ESTIMATED	2024 Taxes: \$ 88.41
Legal Description W1/2 SW1/4 SE1/4 PART S OF RIVER 1993R06364 150531.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	1,359	0	0	1,359	
	2024	0	1,456	0	0	1,456	

15-07-34-400-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-400-006-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

FURGESON DALE G

Address to send notice if different than shown at left:

653 E 1800 NORTH RD
EDINBURG IL 62531

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$1,028 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-07-34-400-006-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-700-001-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-07-34-700-001-00	Class 7100	Acreage 560.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLY ALL EX E1/2 SE TOTAL 560A 530AC LEFT TO MINE 157746.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-07-34-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-750-002-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOMCO LTD

Address to send notice if different than shown at left:

PO BOX 19246
SPRINGFIELD

IL 62794

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-34-750-002-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description PEABODY LSE NO 32 33 & 38 LSE #3097 ROY INT	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-07-34-750-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-750-003-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOMCO LTD

PO BOX 19246
SPRINGFIELD

IL 62794

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-34-750-003-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE RYLTY INT PEABODY LSE # 32-33-38	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	
	2024	0	0	0	0	0	0	

15-07-34-750-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-750-004-00 EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOMCO LTD

PO BOX 19246
SPRINGFIELD

IL 62794

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-07-34-750-004-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE RYLTY INT PEABODY LSE #32-33-38	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-07-34-750-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-07-34-750-005-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HOMCO LTD

Address to send notice if different than shown at left:

PO BOX 19246
SPRINGFIELD

IL 62794

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$3,333 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-07-34-750-005-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line for estimated valuations.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-01-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-01-100-001-00	Class 9900	Acreage 54.938	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description NW1/4 LY W OF SANGCHRIS LAKE ST DOC# 98-11-10 150539.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-11-01-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-01-100-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAM FAMILY LP

Address to send notice if different than shown at left:

2356 W BOARMAN RD
DIVERNON IL 62530

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,207** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-01-100-001-01	Class 0021	Acreage 45.460	Print Date 9/23/2024	2023 Taxes: \$ 1,198.02		ESTIMATED	2024 Taxes: \$ 1,277.07
Legal Description FARM TRACT #36 NW1/4 LY E&S OF SANGCHRIS LAKE 98-07609 98-07610	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	18,956	0	0	18,956	
	2024	0	20,207	0	0	20,207	

15-11-01-100-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/26/2012	\$5,170,000	2012R07047	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-01-100-001-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$63,363** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-01-100-001-02	Class 0083	Acreage 68.600	Print Date 9/23/2024	2023 Taxes: \$ 3,887.86		ESTIMATED	2024 Taxes: \$ 4,004.52
Legal Description NW1/4 EX FARM TRACT 36 & EX 54.938AC LY W OF SANGCHRIS LAKE 68.60 IS FOR SANGCHRIS LAKE 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	61,517	0	0	0	61,517	
	2024	63,363	0	0	0	63,363	

Land Fair Cash Val: 190,089 Building Fair Cash Val: 0 **Non-Farm Value: 190,089**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-01-100-001-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-01-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAM FAMILY LP

Address to send notice if different than shown at left:

2356 W BOARMAN RD
DIVERNON IL 62530

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$123,725** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-01-200-001-00	Class 0021	Acreage 161.000	Print Date 9/23/2024	2023 Taxes: \$ 7,183.46		ESTIMATED	2024 Taxes: \$ 7,638.73
Legal Description FARM TRACT #36 NE1/4 EX FOR SANGCHRIS LAKE 98-07609 150538.000 98-07610 98-04100 98-02609	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	116,351	0	0	116,351	
	2024	0	123,725	0	0	123,725	

15-11-01-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/26/2012	\$5,170,000	2012R07047	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-01-200-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
 ATTN: STATE & LOCAL TAX DEPARTMENT

 PO BOX 219071
 DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$300** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-01-200-001-01	Class 0083	Acreage 0.284	Print Date 9/23/2024	2023 Taxes: \$ 17.72		ESTIMATED		2024 Taxes: \$ 18.52
Legal Description NW COR NW1/4 NE1/4 THIS IS FOR SANGCHRIS LAKE 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	287	0	0	0	287		
	2024	300	0	0	0	300		

Land Fair Cash Val: 900 Building Fair Cash Val: 0 Non-Farm Value: 900

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
 Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
 Signed: _____ Date ___ / ___ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-01-200-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-01-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$98,967** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-01-300-001-00	Class 0083	Acreage 136.952	Print Date 9/23/2024	2023 Taxes: \$ 6,072.48		ESTIMATED	2024 Taxes: \$ 6,254.67
Legal Description SW1/4 EX FOR FARM TRACT #35 & W1/2 SE1/4 6.020AC 98-01242 ST DOC# 98-11-10 150533.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	96,084	0	0	0	96,084	
	2024	98,967	0	0	0	98,967	

Land Fair Cash Val: 296,901 Building Fair Cash Val: 0 **Non-Farm Value: 296,901**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-01-300-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-01-300-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAM FAMILY LP

Address to send notice if different than shown at left:

2356 W BOARMAN RD
DIVERNON IL 62530

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,219** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-01-300-001-01	Class 0021	Acreage 29.070	Print Date 9/23/2024	2023 Taxes: \$ 1,144.54		ESTIMATED	2024 Taxes: \$ 1,214.63
Legal Description FARM TRACT #35 PART NE1/4 SW1/4 98-07609 98-07610 98-02609 98-04100	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	18,110	0	0	18,110	
	2024	0	19,219	0	0	19,219	

15-11-01-300-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/26/2012	\$5,170,000	2012R07047	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-01-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAM FAMILY LP

Address to send notice if different than shown at left:

2356 W BOARMAN RD
DIVERNON IL 62530

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$118,155** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-01-400-001-00	Class 0021	Acreage 153.980	Print Date 9/23/2024	2023 Taxes: \$ 7,023.62		ESTIMATED	2024 Taxes: \$ 7,467.35
Legal Description FARM TRACT #35 SE1/4 EX 6.020 ACRES 98-07609 150537.000 98-07610 98-04100 98-02609	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	111,134	0	0	111,134	
	2024	0	118,155	0	0	118,155	

15-11-01-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/26/2012	\$5,170,000	2012R07047	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-02-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SKAGGS GARY M

Address to send notice if different than shown at left:

11931 COTTON HILL RD
PAWNEE IL 62558

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$43,098 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-02-100-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Exemption History Amount Tax Year

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-02-100-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MINDER WALTER L & MARILYN A

144 E 1800 NORTH RD
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$74,719** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-02-100-002-00	Class 0021	Acreage 108.860	Print Date 9/23/2024	2023 Taxes: \$ 4,580.92		ESTIMATED	2024 Taxes: \$ 4,914.52
Legal Description E111.43AC NW1/4 EX 2.57AC 150541.000 2002R09038	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	69,647	0	0	69,647	
	2024	0	74,719	0	0	74,719	

15-11-02-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/2002	\$210,462		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-02-100-003-00 144 E 1800 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MINDER WALTER L & MARILYN A

Address to send notice if different than shown at left:

144 E 1800 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$56,291** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-02-100-003-00	Class 0011	Acreage 2.570	Print Date 9/23/2024	2023 Taxes: \$ 2,952.10		ESTIMATED	2024 Taxes: \$ 2,978.94
Legal Description BEG 1939.68E NW CR TH E334 S331 W334.21 N340 TO BEG 150541.001 75-334	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,639	208	41,236	8,800	55,883	
	2024	5,557	221	41,713	8,800	56,291	

15-11-02-100-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-02-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

US BANK NA TTEE LUCILLE GARHARD
 TUW FBO KRIS GERHARD & TUW FBO KORT

 205 S 5TH ST
 SPRINGFIELD IL 62701

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$125,872** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-02-200-001-00	Class 0021	Acreage 172.000	Print Date 9/23/2024	2023 Taxes: \$ 7,770.00		ESTIMATED	2024 Taxes: \$ 8,279.02
Legal Description NE 1/4 2004R05177 88-3124	150540.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL
		2023	0	118,133	0	0	118,133
		2024	0	125,872	0	0	125,872

15-11-02-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --
 Signed: _____ Date ____ / ____ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-02-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DMJJ FARMS INC

9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$75,627 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-02-300-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 11/12/2010, \$2,418,400, 2010R05301, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-02-300-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-02-300-002-00	Class 9900	Acreage 47.938	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description S1/2 SW1/4 SW1/4 & SE1/4 SW1/4 EX FOR SANGCHRIS LAKE ST DOC# 98-11-10 150543.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-11-02-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-02-300-002-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,687** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-02-300-002-01	Class 0083	Acreage 11.972	Print Date 9/23/2024	2023 Taxes: \$ 618.60		ESTIMATED		2024 Taxes: \$ 637.15
Legal Description SW1/4 11.972AC IS FOR SANGCHRIS LAKE 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,405	0	0	0	9,405		
	2024	9,687	0	0	0	9,687		

Land Fair Cash Val: 29,061 Building Fair Cash Val: 0 **Non-Farm Value: 29,061**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-02-300-002-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-02-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-02-400-001-00	Class 9900	Acreage 82.241	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description SE1/4 LY N OF SANGCHRIS LAKE ST DOC# 98-11-10 150540.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-11-02-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-02-400-001-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$61,459** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-02-400-001-02	Class 0083	Acreage 60.130	Print Date 9/23/2024	2023 Taxes: \$ 3,924.64		ESTIMATED	2024 Taxes: \$ 4,042.36
Legal Description PART SE1/4 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	59,669	0	0	0	59,669	
	2024	61,459	0	0	0	61,459	

Land Fair Cash Val: 184,377 Building Fair Cash Val: 0 **Non-Farm Value: 184,377**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-02-400-001-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-02-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-02-700-001-00	Class 7100	Acreage 332.740	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLY W1/2 EX S12 STRIP NW TOTAL 332.74A 5.09 LEFT TO MINE 7748 116.2AC DEVEL 5420+11990	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	10	0	10		
	2024	0	0	10	0	10		

15-11-02-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-03-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KNOCHE FAMILY HOLDINGS LLC

Address to send notice if different than shown at left:

7353 AMHERST AVE
SAINT LOUIS MO 63130

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$130,929** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-03-100-001-00	Class 0021	Acreage 178.000	Print Date 9/23/2024	2023 Taxes: \$ 8,070.98		ESTIMATED	2024 Taxes: \$ 8,611.63
Legal Description NW1/4 150546.000 2002R08946	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	122,709	0	0	122,709	
	2024	0	130,929	0	0	130,929	

15-11-03-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-03-200-001-00 76 E 1800 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GINDER CHERYL E TRUSTEE

Address to send notice if different than shown at left:

9563 GINDER RD
ROCHESTER IL 62563

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$119,008** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-03-200-001-00	Class 0011	Acreage 119.000	Print Date 9/23/2024	2023 Taxes: \$ 7,461.72		ESTIMATED	2024 Taxes: \$ 7,827.55
Legal Description W70.00AC E1/2 NE1/4 & W1/2 NE1/4 EX S1/4 2001-05861 150545.000 94-03912	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	7,564	75,757	16,625	13,500	113,446	
	2024	7,457	81,138	16,913	13,500	119,008	

15-11-03-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-03-200-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKAGGS GARY M

Address to send notice if different than shown at left:

11931 COTTON HILL RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,771** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-03-200-002-00	Class 0021	Acreage 17.290	Print Date 9/23/2024	2023 Taxes: \$ 655.56		ESTIMATED	2024 Taxes: \$ 708.44
Legal Description E17.29AC NE1/4 150544.000 2004R02762 QCD 2002R04775 87-19492	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	9,967	0	0	9,967	
	2024	0	10,771	0	0	10,771	

15-11-03-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-03-200-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GINDER CHERYL E TRUSTEE

Address to send notice if different than shown at left:

9563 GINDER RD
ROCHESTER IL 62563

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,799** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-03-200-003-00	Class 0021	Acreage 38.290	Print Date 9/23/2024	2023 Taxes: \$ 1,513.06		ESTIMATED		2024 Taxes: \$ 1,631.11
Legal Description S1/4 W157.29AC NE1/4 2001-05861 150545.001 94-3912		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	23,004	0	0	23,004	
		2024	0	24,799	0	0	24,799	

15-11-03-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-03-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FRY FARMS INC
%KENNETH FRY

5296 E STATE ROUTE 104
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$74,363** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-03-300-001-00	Class 0021	Acreage 98.000	Print Date 9/23/2024	2023 Taxes: \$ 4,606.38		ESTIMATED	2024 Taxes: \$ 4,891.10
Legal Description N1/2 SW1/4 & N18/40 SW1/4 SW1/4 150547.000 79-28401	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	70,034	0	0	70,034	
	2024	0	74,363	0	0	74,363	

15-11-03-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1978	\$370,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-03-300-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SHEEDY JOHN & ELIZABETH

Address to send notice if different than shown at left:

PO BOX 478
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,829** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-03-300-002-00	Class 0021	Acreage 22.000	Print Date 9/23/2024	2023 Taxes: \$ 786.20		ESTIMATED		2024 Taxes: \$ 843.81
Legal Description S22/40 SW1/4 SW1/4 150547.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	11,953	0	0	11,953		
	2024	0	12,829	0	0	12,829		

15-11-03-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-03-300-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DMJJ FARMS INC

9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,178** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-03-300-003-00	Class 0021	Acreage 40.340	Print Date 9/23/2024	2023 Taxes: \$ 1,667.56		ESTIMATED	2024 Taxes: \$ 1,787.59
Legal Description FARM TRACT #38 SE1/4 SW1/4 99-01366 98-01730 ST DOC# 98-11-10 150548.002	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	25,353	0	0	25,353	
	2024	0	27,178	0	0	27,178	

15-11-03-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
11/12/2010	\$2,418,400	2010R05301	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-03-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DMJJ FARMS INC

9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$114,766 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-03-400-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 11/12/2010, \$2,418,400, 2010R05301, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-03-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-03-700-001-00	Class 7100	Acreage 345.610	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLY SE SW & E1/2 EX 30 RD IN NE NE MINED OUT 102.6AC DEVELOPED	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-11-03-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-10-100-001-00	Class 9900	Acreage 124.129	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description THAT PART NW1/4 LY N OF RT 104 EX FOR SANGCHRIS LAKE ST DOC# 98-11-10 150550.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-11-10-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-100-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$11,220 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 33,660 Building Fair Cash Val: 0 Non-Farm Value: 33,660

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-11-10-100-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-100-002-00 IL RTE 104 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,966** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-10-100-002-00	Class 0021	Acreage 16.420	Print Date 9/23/2024	2023 Taxes: \$ 407.54		ESTIMATED	2024 Taxes: \$ 458.18
Legal Description THAT PART S1/2 SE1/4 NW1/4 LY N OF ROUTE 104 150549.001 2000-04882 97-04276	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	6,196	0	0	6,196	
	2024	0	6,966	0	0	6,966	

15-11-10-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-10-200-001-00	Class 9900	Acreage 88.619	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description PART NE1/4 LY N RT 104 ST DOC# 98-11-10 150550.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	
	2024	0	0	0	0	0	0	

15-11-10-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-200-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,565** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-10-200-001-01	Class 0083	Acreage 23.331	Print Date 9/23/2024	2023 Taxes: \$ 1,377.10		ESTIMATED		2024 Taxes: \$ 1,418.40
Legal Description NE1/4 SANGCHRIS LAKE 23.331AC IS FOR SANGCHRIS LAKE 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	20,937	0	0	0	20,937		
	2024	21,565	0	0	0	21,565		

Land Fair Cash Val: 64,695 Building Fair Cash Val: 0 **Non-Farm Value: 64,695**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-10-200-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-200-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,724** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-10-200-002-00	Class 0011	Acreage 27.150	Print Date 9/23/2024	2023 Taxes: \$ 2,276.32		ESTIMATED	2024 Taxes: \$ 2,447.34
Legal Description THT PRT S1/2 NE LY N OF RT 104 150549.000 2000-04882 97-04276	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	20,445	10,121	5,452	0	36,018	
	2024	27,710	6,594	4,420	0	38,724	

15-11-10-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LYTLE LAMOIN E

Address to send notice if different than shown at left:

420 4TH ST
MILFORD NE 68405

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,897** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-10-300-001-00	Class 0021	Acreage 10.000	Print Date 9/23/2024	2023 Taxes: \$ 359.00		ESTIMATED		2024 Taxes: \$ 387.87
Legal Description W1/2 N1/2 NW1/4 SW1/4 2003R08811 150554.000 95-04593 94-03296	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	5,458	0	0	5,458		
	2024	0	5,897	0	0	5,897		

15-11-10-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-300-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,390** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-10-300-002-00	Class 0020	Acreage 5.088	Print Date 9/23/2024	2023 Taxes: \$ 288.74		ESTIMATED		2024 Taxes: \$ 288.74
Legal Description E 1/2 N 1/2 NW 1/4 SW 1/4 EX 4.912 AC FOR LAKE 150554.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,390	0	0	0	4,390		
	2024	4,390	0	0	0	4,390		

Land Fair Cash Val: 13,170 Building Fair Cash Val: 0 **Non-Farm Value: 13,170**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-10-300-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-300-002-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,522** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-10-300-002-01	Class 0083	Acreage 4.912	Print Date 9/23/2024	2023 Taxes: \$ 288.74		ESTIMATED	2024 Taxes: \$ 297.43
Legal Description NE 1/4 NW 1/4 SW 1/4 SANGCHRIS LAKE 4.912AC IS FOR SANGCHRIS LAKE 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,390	0	0	0	4,390	
	2024	4,522	0	0	0	4,522	

Land Fair Cash Val: 13,566 Building Fair Cash Val: 0 **Non-Farm Value: 13,566**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-10-300-002-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-300-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RIGHT LANE ENVIRONMENTAL LLC
 % RIGHT LANE INDUSTRIES
 STE 725
 2601 S BAYSHORE DR
 COCONUT GROVE FL 33133

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,389** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-10-300-003-00	Class 0083	Acreage 91.498	Print Date 9/23/2024	2023 Taxes: \$ 791.12		ESTIMATED		2024 Taxes: \$ 814.87
Legal Description PART NE1/4 SW1/4 & PART S1/2 SW1/4 150549.002 97-04276 97-04688 75-915	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	12,028	0	0	0	12,028		
	2024	12,389	0	0	0	12,389		

Land Fair Cash Val: 37,167 Building Fair Cash Val: 0 **Non-Farm Value: 37,167**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/29/2008	\$205,000	2008R04520	No
12/13/2016	\$2,450,000	2016R04713	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-10-300-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-300-004-00 1634 N 000 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GOODALL DAVID BRANDON & NICOLE ANN

Address to send notice if different than shown at left:

1634 N 000 EAST RD
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,448** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-10-300-004-00	Class 0011	Acreage 6.650	Print Date 9/23/2024	2023 Taxes: \$ 478.38		ESTIMATED		2024 Taxes: \$ 752.97
Legal Description BEG SW COR NW1/4 SW1/4 N436.68' TO POB N218.03' E1328.99' S218.27' W1328.25' TO BEG 150549.003 98-08394 97-04276	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,358	915	0	0	7,273		
	2024	10,443	1,005	0	0	11,448		

15-11-10-300-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Exemption History **Amount**
Tax Year

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
05/03/2007	\$100,000	2007R02203	No
09/14/2022	\$99,750	2022R03346	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-300-004-01 1649 N 000 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FICKAS JOHN & JILL

Address to send notice if different than shown at left:

PO BOX 912
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$63,861** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-10-300-004-01	Class 0011	Acreage 6.660	Print Date 9/23/2024	2023 Taxes: \$ 3,233.62		ESTIMATED		2024 Taxes: \$ 3,805.71
Legal Description BEG SW COR SW1/4 SW1/4 N876.01 POB N435.41 E666.76 S435.64 W665.27 PARCEL C 99-02858	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	8,553	645	45,965	0	55,163		
	2024	13,153	441	25,467	24,800	63,861		

15-11-10-300-004-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1999	\$45,000		No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-300-004-02 1606 N 000 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOWARD WESLEY ANDREW

Address to send notice if different than shown at left:

1606 N 000 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$81,516** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-10-300-004-02	Class 0011	Acreage 6.660	Print Date 9/23/2024	2023 Taxes: \$ 4,329.40	ESTIMATED			2024 Taxes: \$ 4,966.94
Legal Description BEG SW COR SW1/4 SW1/4 N439.50 POB N436.51 E665.27 S436.49 W663.78 TO BEG 2002-03355	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	16,128	188	55,507	0	71,823		
	2024	21,523	206	59,787	0	81,516		

15-11-10-300-004-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2000	\$20,000		Yes
10/19/2005	\$35,000	2005R05929	Yes
07/21/2011	\$35,000	2011R03129	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-300-004-03 1594 N 000 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BEITEL BROQUE L &
SHELBY A GRAHAM

1594 N 000 EAST RD
PAWNEE

IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$58,328** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-10-300-004-03	Class 0010	Acreage 6.681	Print Date 9/23/2024	2023 Taxes: \$ 2,798.60		ESTIMATED	2024 Taxes: \$ 3,441.79
Legal Description BEG SW COR SW1/4 SW1/4 N439.50 E663.78 S438.47 W662.26 TO BEG 99-05612	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	14,402	0	34,147	0	48,549	
	2024	19,470	0	38,858	0	58,328	

Land Fair Cash Val: 58,410 Building Fair Cash Val: 116,574 **Non-Farm Value: 174,984**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/14/2022	\$175,000	2022R03758	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-10-300-004-03

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-300-004-04 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LANGHEIM REESE N

Address to send notice if different than shown at left:

PO BOX 297
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,045** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-10-300-004-04	Class 0021	Acreage 8.000	Print Date 9/23/2024	2023 Taxes: \$ 250.74		ESTIMATED		2024 Taxes: \$ 266.05
Legal Description BEG SW COR SW1/4 E662.26' TO POB N301' E1180' S300' W TO THE POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	3,812	0	0	3,812		
	2024	0	4,045	0	0	4,045		

15-11-10-300-004-04

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/18/2005	\$103,500	2005R02836	No
05/18/2005	\$206,500	2005R02837	No
02/26/2008	\$536,000	2008R00884	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-300-004-05 1634 N 000 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GOODALL DAVID BRANDON & NICOLE ANN

Address to send notice if different than shown at left:

1634 N 000 EAST RD
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$122,160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-10-300-004-05	Class 0011	Acreage 6.650	Print Date 9/23/2024	2023 Taxes: \$ 6,111.60	ESTIMATED			2024 Taxes: \$ 7,640.23
Legal Description BEG SW COR NW1/4 SW1/4 N218.40' TO POB N218.28 E1328.25 S218.27' W1327.50' TO BEG 98-08394 97-04276	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	15,661	462	82,796	0	98,919		
	2024	21,030	505	100,625	0	122,160		

15-11-10-300-004-05

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/03/2007	\$100,000	2007R02203	No
09/14/2022	\$380,250	2022R03344	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-300-004-06 1632 N 000 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SICILIANO FRANK C & PATRICIA J

Address to send notice if different than shown at left:

468 BALSAM CT
MARCO ISLAND FL 34145

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$92,366** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-10-300-004-06	Class 0011	Acreage 6.650	Print Date 9/23/2024	2023 Taxes: \$ 5,442.48	ESTIMATED			2024 Taxes: \$ 6,075.22
Legal Description BEG SW COR NW1/4 SW1/4 N218.40' E1327.50' S218.39' W1326.76' TO BEG 1998R08394 1997R04276	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	13,753	1,072	39,021	28,900	82,746		
	2024	17,900	1,173	44,393	28,900	92,366		

15-11-10-300-004-06

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/28/2005	\$48,000	2005R04275	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT
PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property,
appeals this assessment of said property at \$6,825 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 20,475 Building Fair Cash Val: 0 Non-Farm Value: 20,475

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-11-10-400-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-400-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RIGHT LANE ENVIRONMENTAL LLC
 % RIGHT LANE INDUSTRIES
 STE 725
 2601 S BAYSHORE DR
 COCONUT GROVE FL 33133

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$54,069** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-10-400-001-01	Class 0080	Acreage 149.356	Print Date 9/23/2024	2023 Taxes: \$ 3,452.70		ESTIMATED	2024 Taxes: \$ 3,556.30
Legal Description PART SE1/4 97-04688 97-04276	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	19,633	0	32,861	0	52,494	
	2024	20,222	0	33,847	0	54,069	

Land Fair Cash Val: 60,666 Building Fair Cash Val: 101,541 **Non-Farm Value: 162,207**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/29/2008	\$205,000	2008R04520	No
12/13/2016	\$2,450,000	2016R04713	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-10-400-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-501-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ILLINOIS & MIDLAND RR INC

STE 300
200 MERIDIAN CENTRE BLVD
ROCHESTER NY 14618

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-10-501-001-00	Class 5100	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 21,116.06		ESTIMATED 2024 Taxes: \$ 46,228.11	
Legal Description TRACK 8.41 MILE & IMPROVEMENTS STATE ASSESS 155100CIM.002 96-00807	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-11-10-501-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-501-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PAWNEE TRANSLOADING CO

STE 300
200 MERIDIAN CENTRE BLVD
ROCHESTER NY 14618

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$76,454** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-10-501-002-00	Class 5000	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 5,028.64		ESTIMATED	2024 Taxes: \$ 5,028.63
Legal Description LESSEE PAWNEE TRANSPORTATION CO. WAREHOUSE 64X20X10	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	76,454	0	76,454	
	2024	0	0	76,454	0	76,454	

15-11-10-501-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-10-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$500** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-10-700-001-00	Class 7100	Acreage 500.000	Print Date 9/23/2024	2023 Taxes: \$ 32.90		ESTIMATED		2024 Taxes: \$ 32.89
Legal Description COAL & MINERAL RIGHTS UNDERLY SE & NE & NW & N1/2 NW SW TOTAL 500A MINED OUT 157750.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	500	0	500		
	2024	0	0	500	0	500		

15-11-10-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/08/2008	\$300,000	2008R03604	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-11-100-001-00	Class 9900	Acreage 13.815	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description NW1/4 NW1/4 LY N&W OF SANGCHRIS LAKE ST DOC# 98-11-10 150557.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-11-11-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-100-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$64,494** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-11-100-001-01	Class 0021	Acreage 98.410	Print Date 9/23/2024	2023 Taxes: \$ 3,833.88		ESTIMATED	2024 Taxes: \$ 4,076.00
Legal Description FARM TRACT #37 NW1/4 LY S&E OF SANGCHRIS LAKE 2000-04883 98-02899	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	60,663	0	0	60,663	
	2024	0	64,494	0	0	64,494	

15-11-11-100-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-100-001-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,587** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-11-100-001-02	Class 0083	Acreage 35.277	Print Date 9/23/2024	2023 Taxes: \$ 1,999.52		ESTIMATED	2024 Taxes: \$ 2,059.49
Legal Description NW1/4 35.277AC IS FOR SANGCHRIS LAKE 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	31,638	0	0	0	31,638	
	2024	32,587	0	0	0	32,587	

Land Fair Cash Val: 97,761 Building Fair Cash Val: 0 **Non-Farm Value: 97,761**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-11-100-001-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,158,643** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-11-200-001-00	Class 0080	Acreage 108.738	Print Date 9/23/2024	2023 Taxes: \$ 132,449.36				ESTIMATED
				2024 Taxes: \$ 136,425.37				
Legal Description PART NE1/4 150555.000 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	56,935	0	2,038,796	0	2,095,731		
	2024	58,643	0	2,100,000	0	2,158,643		

Land Fair Cash Val: 175,929 Building Fair Cash Val: 6,300,000 **Non-Farm Value: 6,475,929**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-11-200-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-200-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,891** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-11-200-001-01	Class 0021	Acreage 35.280	Print Date 9/23/2024	2023 Taxes: \$ 942.94		ESTIMATED 2024 Taxes: \$ 1,004.30	
Legal Description FARM TRACT #37 NE1/4 LY W OF SANGCHRIS LAKE 2000-04883 98-02899	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	14,920	0	0	14,920	
	2024	0	15,891	0	0	15,891	

15-11-11-200-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-200-001-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

COMMONWEALTH EDISON CO
4TH FL
3 LINCOLN CTR
OAKBROOK TERRACE IL 60181

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$1,867 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL

Land Fair Cash Val: 5,601 Building Fair Cash Val: 0 Non-Farm Value: 5,601

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-11-11-200-001-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-200-002-00 1650 N 190 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$65,938** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-11-200-002-00	Class 0060	Acreage 1.440	Print Date 9/23/2024	2023 Taxes: \$ 4,045.86		ESTIMATED		2024 Taxes: \$ 4,167.26
Legal Description PART S1/2 NE1/4 2001-07954 150556.000 91-02874	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,319	0	59,698	0	64,017		
	2024	4,449	0	61,489	0	65,938		

Land Fair Cash Val: 13,347 Building Fair Cash Val: 184,467 **Non-Farm Value: 197,814**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-11-200-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

RIGHT LANE ENVIRONMENTAL LLC
% RIGHT LANE INDUSTRIES
STE 725
2601 S BAYSHORE DR
COCONUT GROVE FL 33133

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property,
appeals this assessment of said property at \$21,082 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated _____
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 63,246 Building Fair Cash Val: 0 Non-Farm Value: 63,246

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___/___/2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-11-300-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,950** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-11-400-001-00	Class 0083	Acreage 19.000	Print Date 9/23/2024	2023 Taxes: \$ 1,162.12		ESTIMATED	2024 Taxes: \$ 1,197.63
Legal Description COM 50.5 S NW COR SW1/4 TH E 1326.75 N43.23 E2646.47 S 660 W961.09 N291.89 W830 N 285 W2337.3 INTO SEC 10 150	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	18,388	0	0	0	18,388	
	2024	18,950	0	0	0	18,950	

Land Fair Cash Val: 56,850 Building Fair Cash Val: 0 **Non-Farm Value: 56,850**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-11-400-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-400-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON TODD N & AUBRIE M

Address to send notice if different than shown at left:

5864 E DIVERNON RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,120** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-11-400-001-01	Class 0080	Acreage 19.110	Print Date 9/23/2024	2023 Taxes: \$ 1,222.42		ESTIMATED		2024 Taxes: \$ 1,081.98
Legal Description BEG 703.23' SNE COR NW1/4 SE1/4 TH W250' TO POB TH W961' N292' W366' S TO S LINE NW1/4 SE1/4 TH E TO E LINE NW1/4 SE1/4 TH N241', W250', N350' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,913	0	12,429	0	19,342		
	2024	7,120	0	10,000	0	17,120		

Land Fair Cash Val: 21,360 Building Fair Cash Val: 30,000 **Non-Farm Value: 51,360**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/14/2006	\$449,760	2006R03396	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-11-400-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-400-001-02

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

EDK DEFENSIVE CONSULTANTS LLC

Address to send notice if different than shown at left:

1819 SPARTAN DR
CHATHAM IL 62629

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$43,329 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 53,361 Building Fair Cash Val: 76,626 Non-Farm Value: 129,987

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? (Sales History)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-11-11-400-001-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-400-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RURAL ELECTRIC CONVENIENCE COOP CO
 3973 W STATE RTE 104
 PO BOX 19
 AUBURN IL 62615

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,212** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-11-400-002-00	Class 0060	Acreage 0.380	Print Date 9/23/2024	2023 Taxes: \$ 524.42		ESTIMATED 2024 Taxes: \$ 540.13	
Legal Description TR 120X140 NW COR NE1/4 SE1/4 150562.001 68-187141	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,328	0	6,645	0	7,973	
	2024	1,368	0	6,844	0	8,212	

Land Fair Cash Val: 4,104 Building Fair Cash Val: 20,532 **Non-Farm Value: 24,636**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/30/2008	\$4,187	2008R06456	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
 Signed: _____ Date ___ / ___ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-11-400-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-400-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

EGGIMANN DALE A & JULIE A TTEE

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$38,795 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-11-11-400-003-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-400-004-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MEGGINSON TODD N & AUBRIE M

Address to send notice if different than shown at left:

5864 E DIVERNON RD
PAWNEE IL 62558

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$10,860 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-11-400-004-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line for estimated valuations.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 07/14/2006, \$449,760, 2006R03396, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-400-004-01 1601 N 175 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DENNISON DARIN R & REBECCA L

1601 N 175 EAST RD

PAWNEE

62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$65,865** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-11-400-004-01	Class 0011	Acreage 5.000	Print Date 9/23/2024	2023 Taxes: \$ 4,001.20		ESTIMATED		2024 Taxes: \$ 3,937.52
Legal Description BEG SE COR W1/2 SE1/4 W356.60' NWLY134.48' NWLY106.96' NWLY170.24' NWLY106.86' E572.47' S427.81' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,779	1,315	59,739	0	66,833		
	2024	5,697	1,415	58,753	0	65,865		

15-11-11-400-004-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/17/2008	\$36,300	2008R01319	No
12/19/2011	\$28,250	2011R05944	No
04/29/2015	\$30,000	2015R01631	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-400-004-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KERN DONALD G & ANITA M

Address to send notice if different than shown at left:

1030 W JACKSON ST
AUBURN IL 62615

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,489** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-11-400-004-02	Class 0021	Acreage 9.200	Print Date 9/23/2024	2023 Taxes: \$ 275.26	ESTIMATED			2024 Taxes: \$ 295.26
Legal Description BEG SE COR W1/2 SE1/4 N427.81' TO POB N701.52' W506.69' SWLY157.87' SWLY88.10' SWLY174.32' SWLY292.70' E572.47' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	4,185	0	0	4,185		
	2024	0	4,489	0	0	4,489		

15-11-11-400-004-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2008	\$57,960	2008R04025	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-400-005-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

UFFELMAN FARMS INC
%CAROLYN UFFELMAN

2231 GREENBRIAR RD
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,476** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-11-400-005-00	Class 0021	Acreage 30.000	Print Date 9/23/2024	2023 Taxes: \$ 1,324.82		ESTIMATED	2024 Taxes: \$ 1,412.55
Legal Description S30.00AC SE1/4 SE1/4 150563.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	20,142	0	0	20,142	
	2024	0	21,476	0	0	21,476	

15-11-11-400-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-11-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$390** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-11-700-001-00	Class 7100	Acreage 382.480	Print Date 9/23/2024	2023 Taxes: \$ 24.66		ESTIMATED	2024 Taxes: \$ 24.65
Legal Description COAL & MINERAL RIGHTS UNDERLY W1/2 E1/2 & NW EX 5.3A & S30A SE SE 382.48AC MINED OUT 7751 96-01186 157751.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	390	0	390	
	2024	0	0	390	0	390	

15-11-11-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
07/08/2008	\$300,000	2008R03604	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COMMONWEALTH EDISON CO

4TH FL
3 LINCOLN CTR
OAKBROOK TERRACE IL 60181

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,472** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-12-100-001-00	Class 0080	Acreage 4.874	Print Date 9/23/2024	2023 Taxes: \$ 1,194.80		ESTIMATED	2024 Taxes: \$ 1,230.62	
Legal Description BEG SW COR NW1/4 N1157.72 POB E468.09 NELY15.64 N340.37 W566.38 S350.32 150566.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,657	0	16,248	0	18,905		
	2024	2,737	0	16,735	0	19,472		

Land Fair Cash Val: 8,211 Building Fair Cash Val: 50,205 **Non-Farm Value: 58,416**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-12-100-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-100-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,784,500** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-12-100-001-01	Class 0080	Acreage 149.716	Print Date 9/23/2024	2023 Taxes: \$ 477,626.56		ESTIMATED 2024 Taxes: \$ 491,977.29	
Legal Description NW1/4 EX 4.874AC & PART W1/2 NE1/4 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	130,435	0	7,426,995	0	7,557,430	
	2024	134,500	0	7,650,000	0	7,784,500	

Land Fair Cash Val: 403,500 Building Fair Cash Val: 2,950,000 **Non-Farm Value: 23,353,500**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-12-100-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-100-001-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-12-100-001-02	Class 9700	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,318.60	ESTIMATED			2024 Taxes: \$ 2,318.60
Legal Description STATE POLLUTION ASSESSMENT 100 011 0479 35557 100 011 0532 1130 150566.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0		
	2024	0	0	0	0	0		

15-11-12-100-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-12-200-001-00	Class 9900	Acreage 12.641	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description SE1/4 NE1/4 LY E OF SANGCHRIS LAKE ST DOC# 98-11-10 150564.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-11-12-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-200-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAM FAMILY LP

Address to send notice if different than shown at left:

2356 W BOARMAN RD
DIVERNON IL 62530

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$85,504** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-12-200-001-01	Class 0011	Acreage 64.960	Print Date 9/23/2024	2023 Taxes: \$ 2,511.18		ESTIMATED	2024 Taxes: \$ 5,403.82
Legal Description FARM TRACT #35 NE1/4 LY N&W OF SANGCHRIS LAKE 98-02609 98-07610	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	39,734	0	0	39,734	
	2024	5,000	41,337	39,167	0	85,504	

15-11-12-200-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/26/2012	\$5,170,000	2012R07047	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-200-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$32,529 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-11-12-200-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DALE A & JULIE A TTEE

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,963** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-12-300-001-00	Class 0021	Acreage 48.790	Print Date 9/23/2024	2023 Taxes: \$ 2,151.06		ESTIMATED	2024 Taxes: \$ 2,299.63
Legal Description N50.00AC W1/2 SW1/4 EX 40 STRIP FOR ROAD 150570.000 2004R04153 2001R00393 1986R15523	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	32,704	0	0	32,704	
	2024	0	34,963	0	0	34,963	

15-11-12-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-300-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RICHESON JOHN M & TERRY L

Address to send notice if different than shown at left:

46 E 1550 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$48,389** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-12-300-002-00	Class 0021	Acreage 72.590	Print Date 9/23/2024	2023 Taxes: \$ 2,849.36		ESTIMATED	2024 Taxes: \$ 3,058.17
Legal Description E1/2 SW EX 10A NW COR PLATTED & SICILY LOTS 5 6 7 8 9 10 11 19 20 21 BLK 2 & LTS 7 THRU 12 BLK4 150567.000 2002-05930 ED	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	45,085	0	0	45,085	
	2024	0	48,389	0	0	48,389	

15-11-12-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-300-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

UFFELMAN FARMS INC
%CAROLYN UFFELMAN

2231 GREENBRIAR RD
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,585** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-12-300-003-00	Class 0021	Acreage 30.000	Print Date 9/23/2024	2023 Taxes: \$ 1,458.80		ESTIMATED	2024 Taxes: \$ 1,551.26
Legal Description S3/8 W1/2 SW1/4 150571.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	22,179	0	0	22,179	
	2024	0	23,585	0	0	23,585	

15-11-12-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-300-004-00 235 E 1640 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCADAMS RICHARD

Address to send notice if different than shown at left:

235 E 1640 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,886** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: A REVALUATION OF PROPERTY.

Parcel Number 15-11-12-300-004-00	Class 0061	Acreage 1.320	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description PART OF NE1/4 SW1/4 A TRACT 61.4X350 & 59.5X605 ALONG C&IM RAILROAD 2002-05456 95-05155	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,933	0	12,848	0	16,781		
	2024	3,983	0	11,903	0	15,886		

Land Fair Cash Val: 11,949 Building Fair Cash Val: 35,709 **Non-Farm Value: 47,658**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	1908
	ELDERLY	5000
	SEN FREEZE	3873
2024	OWNER OCCUPD	6000
	Disabled Person	1908
	ELDERLY	5000
	SEN FREEZE	2978

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2002	\$22,200		Yes
09/15/2006	\$26,500	2006R04534	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-12-300-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-301-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DALE A & JULIE A TTEE

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$464** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-12-301-001-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 29.32		ESTIMATED	2024 Taxes: \$ 29.32	
Legal Description SICILY LOTS 1 THRU 6 BLK 1 2003R00882 98-01242 152922.000 87-24430 316X236.50 11-12-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	464	0	0	0	464		
	2024	464	0	0	0	464		

Land Fair Cash Val: 1,392 Building Fair Cash Val: 0 Non-Farm Value: 1,392

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-12-301-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-302-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DALE A & JULIE A TTEE

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$337** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-12-302-001-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 21.74		ESTIMATED		2024 Taxes: \$ 21.30
Legal Description SICILY LOTS LOTS 1 2 3 & 4 BLK 2 2004R01585 2003R00881 1998R01242 1987R24430 80X150' 152925.000 11-12-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	344	0	0	0	344		
	2024	337	0	0	0	337		

Land Fair Cash Val: 1,011 Building Fair Cash Val: 0 **Non-Farm Value: 1,011**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-12-302-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-302-005-00 1639 N 230 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SLOAN SHELBY & LYNORA IVERSON

Address to send notice if different than shown at left:

1636 N 230 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$790** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-12-302-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 50.76		ESTIMATED	2024 Taxes: \$ 49.93	
Legal Description SICILY LOTS 12 13 14 15 BLK 2 152932.000 B239 P376 80X150 11-12-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	344	0	459	0	803		
	2024	337	0	453	0	790		

Land Fair Cash Val: 1,011 Building Fair Cash Val: 1,359 **Non-Farm Value: 2,370**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-12-302-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-302-006-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SLOAN SHELBY &
LYNORA IVERSON
636 N 230 EAST RD

PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,909** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-12-302-006-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 120.66		ESTIMATED 2024 Taxes: \$ 120.65	
Legal Description SICILY LOTS 16 17 & 18 BLK 2 98-01242 152936.000 66X150 2003R00909 11-12-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,909	0	0	0	1,909	
	2024	1,909	0	0	0	1,909	

Land Fair Cash Val: 5,727 Building Fair Cash Val: 0 Non-Farm Value: 5,727

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/18/2007	\$600	2007R02431	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-12-302-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-303-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DALE A & JULIE A TTEE

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$353** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-12-303-001-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 22.64		ESTIMATED		2024 Taxes: \$ 22.31
Legal Description SICILY LOTS 1 THRU 5 & LOTS 6 7 & 8 EX N16 BLK 3 237.5X150& 142.5X150 98-01242 87-24430 11-12-F 2003R00883 152947.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	358	0	0	0	358		
	2024	353	0	0	0	353		

Land Fair Cash Val: 1,059 Building Fair Cash Val: 0 **Non-Farm Value: 1,059**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-12-303-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-303-002-00 1636 N 230 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SLOAN SHELBY

Address to send notice if different than shown at left:

1636 N 230 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,467** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change: OMITTED ASSESSMENT FOR IMPROVEMENT OR BLDG THAT SHOULD HAVE BEEN ASSESSED PRIOR YEAR(S)

Parcel Number 15-11-12-303-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 644.52	ESTIMATED			2024 Taxes: \$ 724.71
Legal Description SICILY S150 LOTS 9 & 10 BLK 3 2004R05054 152949.000 95X150 11-12-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,357	0	14,841	0	16,198		
	2024	1,337	0	16,130	0	17,467		

Land Fair Cash Val: 4,011 Building Fair Cash Val: 48,390 **Non-Farm Value: 52,401**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2004	\$36,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-12-303-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-304-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PHILLIPS DAVID L

Address to send notice if different than shown at left:

6 WILDWOOD RD
 SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$564** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-12-304-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 37.42		ESTIMATED		2024 Taxes: \$ 35.64
Legal Description SICILY LOTS 4 5 & 6 BLK 4 2003R00880 98-01243 152955.000 74-11510 166X150 11-12-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	464	0	128	0	592		
	2024	457	0	107	0	564		

Land Fair Cash Val: 1,371 Building Fair Cash Val: 321 **Non-Farm Value: 1,692**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-12-304-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-304-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

PHILLIPS DAVID L

Address to send notice if different than shown at left:

6 WILDWOOD RD
SPRINGFIELD IL 62704

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$633 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 1,899 Building Fair Cash Val: 0 Non-Farm Value: 1,899

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow pointing up)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-11-12-304-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

UFFELMAN FARMS INC

2231 GREENBRIAR RD
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,007** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-12-400-001-00	Class 0080	Acreage 0.938	Print Date 9/23/2024	2023 Taxes: \$ 665.44		ESTIMATED		2024 Taxes: \$ 632.44
Legal Description N215' W190' W1/2 SE1/4 2003R00744 1998R01243 1987R24430 150572.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,637	0	3,892	0	10,529		
	2024	6,540	0	3,467	0	10,007		

Land Fair Cash Val: 19,620 Building Fair Cash Val: 10,401 **Non-Farm Value: 30,021**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/1998	\$3,250		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-12-400-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-400-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

UFFELMAN FARMS INC
% ALBERTA UFFELMAN

2231 GREENBRIAR RD
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$50,237 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-11-12-400-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Yes/No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-400-002-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

UFFELMAN FARMS INC

2231 GREENBRIAR RD
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$15,860 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-12-400-002-01

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow pointing up)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 05/01/1999, \$59,000, Yes)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-400-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAMBACHER BLANCHE AS TRUSTEE
 957 E 1500 NORTH RD
 TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,634** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-12-400-003-00	Class 0021	Acreage 36.490	Print Date 9/23/2024	2023 Taxes: \$ 1,402.34		ESTIMATED	2024 Taxes: \$ 1,493.66
Legal Description FARM TRACT #27 BEG SE COR NE1/4 SE1/4 N649.97 TO SANG-CHRIS LAKE FOLLOW ALONG LAKE 98-01632	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	22,189	0	0	22,189	
	2024	0	23,634	0	0	23,634	

15-11-12-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
 Signed: _____ Date ____ / ____ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-400-004-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAMBACHER BLANCHE AS TRUSTEE

957 E 1500 NORTH RD

TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,756** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-12-400-004-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,766.62		ESTIMATED	2024 Taxes: \$ 1,880.57
Legal Description SE1/4 SE1/4 150573.001 96-07520	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	27,953	0	0	27,953	
	2024	0	29,756	0	0	29,756	

15-11-12-400-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-501-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ILLINOIS & MIDLAND RR INC

STE 300
200 MERIDIAN CENTRE BLVD
ROCHESTER NY 14618

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-12-501-001-00	Class 5100	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 5,648.54		ESTIMATED	2024 Taxes: \$ 12,419.67	
Legal Description TRACK 2.36 MILE STATE ASSESS MHRE 155100CIM.001 96-00807	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-11-12-501-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-501-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RYAN LLC

STE 1500
1233 WEST LOOP S
HOUSTON TX 77027

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$384,089** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-12-501-002-00	Class 5000	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 24,274.28		ESTIMATED		2024 Taxes: \$ 24,274.27
Legal Description LESSEE REED MINERALS PART S1/2 NW1/4 FLY ASH PLANT 155003.000 96-00807	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	384,089	0	384,089		
	2024	0	0	384,089	0	384,089		

15-11-12-501-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-501-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

RYAN LLC

STE 1500
1233 WEST LOOP S
HOUSTON TX 77027

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$21,860 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-12-501-003-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-12-501-005-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PAWNEE TRANSLOADING CO

STE 300
200 MERIDIAN CENTRE BLVD
ROCHESTER NY 14618

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$669,948** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-12-501-005-00	Class 5000	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 42,340.46		ESTIMATED		2024 Taxes: \$ 42,340.45
Legal Description LESSEE PAWNEE TRANSPORTATION	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	669,948	0	669,948		
	2024	0	0	669,948	0	669,948		

15-11-12-501-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-13-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

UFFELMAN FARMS INC
%CAROLYN UFFELMAN

2231 GREENBRIAR RD
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$62,057** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-13-100-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,838.14		ESTIMATED	2024 Taxes: \$ 4,081.69
Legal Description W1/2 NW1/4 150579.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	58,354	0	0	58,354	
	2024	0	62,057	0	0	62,057	

15-11-13-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-13-100-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

UFFELMAN FARMS INC
%CAROLYN UFFELMAN

2231 GREENBRIAR RD
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$105,218** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-13-100-002-00	Class 0011	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 6,714.08		ESTIMATED	2024 Taxes: \$ 6,920.54
Legal Description E1/2 NW1/4 150578.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	7,542	47,505	29,032	18,000	102,079	
	2024	7,433	51,038	28,747	18,000	105,218	

15-11-13-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-13-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKINNER WILLIAM TRUST 0470401
 %US BANK FARM MANAGEMENT
 3RD FL
 205 S 5TH ST
 SPRINGFIELD IL 62701

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$55,844** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-13-200-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,298.64		ESTIMATED	2024 Taxes: \$ 3,529.32
Legal Description W1/2 NE1/4 150577.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	52,194	0	0	52,194	
	2024	0	55,844	0	0	55,844	

15-11-13-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-13-200-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAMBACHER BLANCHE AS TRUSTEE

957 E 1500 NORTH RD

TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,811** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-13-200-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,828.74		ESTIMATED		2024 Taxes: \$ 1,947.24
Legal Description NE1/4 NE1/4 150574.000 96-07520	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	28,936	0	0	28,936		
	2024	0	30,811	0	0	30,811		


15-11-13-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**

Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-13-200-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAMBACHER BLANCHE AS TRUSTEE

957 E 1500 NORTH RD

TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,319** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-13-200-003-00	Class 0021	Acreage 10.000	Print Date 9/23/2024	2023 Taxes: \$ 496.62		ESTIMATED		2024 Taxes: \$ 525.76
Legal Description W10.00AC SE1/4 NE1/4 150575.001 96-07520	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	7,858	0	0	7,858		
	2024	0	8,319	0	0	8,319		

15-11-13-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-13-200-004-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAMBACHER BLANCHE AS TRUSTEE
 957 E 1500 NORTH RD
 TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,831** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-13-200-004-00	Class 0021	Acreage 30.440	Print Date 9/23/2024	2023 Taxes: \$ 1,417.58		ESTIMATED	2024 Taxes: \$ 1,506.11
Legal Description FARM TRACT #29 BEG SE COR SE1/4 NE1/4 W1004.13 N1320.60 E1004.02 S TO BEG 150575.000 98-01632	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	22,430	0	0	22,430	
	2024	0	23,831	0	0	23,831	

15-11-13-200-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
 Signed: _____ Date ____ / ____ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-13-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DOUBLE SS FARMS INC

14302 S COMANCHE RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,008** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-13-300-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,918.16		ESTIMATED		2024 Taxes: \$ 2,039.50
Legal Description NW1/4 SW1/4 2003R02076 1999R07016 150580.000		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	29,163	0	0	29,163	
		2024	0	31,008	0	0	31,008	

15-11-13-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/29/2019	16,792,275	2019R00312	No
04/17/2020	\$500,000	2020R01281	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-13-300-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

UFFELMAN FARMS INC
%CAROLYN UFFELMAN

2231 GREENBRIAR RD
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$57,590** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-13-300-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,543.14		ESTIMATED	2024 Taxes: \$ 3,787.88
Legal Description E1/2 SW1/4 150581.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	53,869	0	0	53,869	
	2024	0	57,590	0	0	57,590	

15-11-13-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-13-300-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

UFFELMAN FARMS INC
% ALBERTA UFFELMAN

2231 GREENBRIAR RD
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,133** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-13-300-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,990.24		ESTIMATED	2024 Taxes: \$ 2,113.49
Legal Description SW1/4 SW1/4 150579.001 91-00443	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	30,259	0	0	30,259	
	2024	0	32,133	0	0	32,133	

15-11-13-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-13-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKINNER WM TRUST 0470401
%US BANK FARM MANAGEMENT

205 S 5TH ST
SPRINGFIELD IL 62701

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$59,304** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-13-400-001-00	Class 0021	Acreage 81.000	Print Date 9/23/2024	2023 Taxes: \$ 3,654.24		ESTIMATED	2024 Taxes: \$ 3,900.62
Legal Description W81.00AC SE1/4 150582.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	55,558	0	0	55,558	
	2024	0	59,304	0	0	59,304	

15-11-13-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-13-400-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILLER DIANE ORLANDINI FAMILY LLC
%DIANE M MILLER

6117 GREENWALT DR
SPRINGFIELD IL 62711

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$54,325** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-13-400-002-00	Class 0021	Acreage 79.000	Print Date 9/23/2024	2023 Taxes: \$ 3,393.04		ESTIMATED	2024 Taxes: \$ 3,573.13
Legal Description E1/2 SE1/4 EX 1 SQ A IN NW COR 150576.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	50,865	0	0	50,865	
	2024	0	54,325	0	0	54,325	

15-11-13-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-13-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-13-700-001-00	Class 7100	Acreage 319.550	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING W1/2 NE & W1/4 W1/2 & W 7 E1/2 SW & E ALL MINED OUT 157753.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-11-13-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON TODD N & AUBRIE M

Address to send notice if different than shown at left:

5864 E DIVERNON RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$83,998** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-14-100-001-00	Class 0021	Acreage 114.879	Print Date 9/23/2024	2023 Taxes: \$ 5,869.48		ESTIMATED	2024 Taxes: \$ 5,524.83
Legal Description BEG SW COR NW1/4 E640' TO POB N2642.16' E1891.35' S2641.68' W1209.89' W687.92' TO THE POB 1997R04276 1978R19003 150586.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	81,238	0	8,000	89,238	
	2024	0	83,998	0	0	83,998	

15-11-14-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/09/2005	\$459,516	2005R06931	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-100-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

RIGHT LANE ENVIRONMENTAL LLC
% RIGHT LANE INDUSTRIES
STE 725
2601 S BAYSHORE DR
COCONUT GROVE FL 33133

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$5,260 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 15,780 Building Fair Cash Val: 0 Non-Farm Value: 15,780

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___/___/2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-14-100-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON TODD N & AUBRIE M

Address to send notice if different than shown at left:

5864 E DIVERNON RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$37,179** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-14-200-001-00	Class 0021	Acreage 55.120	Print Date 9/23/2024	2023 Taxes: \$ 2,289.90		ESTIMATED	2024 Taxes: \$ 2,445.39
Legal Description E136.80' NW1/4 & PART W1/2 NE1/4 1997R04276 150583.003	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	34,815	0	0	34,815	
	2024	0	37,179	0	0	37,179	

15-11-14-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/14/2006	\$449,760	2006R03396	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-200-001-01 1571 N 175 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAY SCOTT E & MARY J

Address to send notice if different than shown at left:

1571 N 175 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$92,740** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-14-200-001-01	Class 0011	Acreage 6.590	Print Date 9/23/2024	2023 Taxes: \$ 5,678.60		ESTIMATED	2024 Taxes: \$ 5,705.18
Legal Description BEG SE COR W1/2 NE1/4 N905.46' POB W310.74' NWLY62.90' NWLY673.27' NELY379.59' SELY266.07' SELY73.75' SELY156.23' SELY106.03' E26.36'	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	9,365	1,258	75,713	6,000	92,336	
	2024	9,227	1,380	76,133	6,000	92,740	

15-11-14-200-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/06/2008	\$48,000	2008R01125	No
12/03/2020	\$275,000	2020R04829	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-200-003-00 1591 N 175 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLARK SHIRLEY SUE

Address to send notice if different than shown at left:

1591 N 175 EAST RD
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$54,155** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-11-14-200-003-00	Class 0011	Acreage 10.520	Print Date 9/23/2024	2023 Taxes: \$ 2,219.66		ESTIMATED		2024 Taxes: \$ 2,233.33
Legal Description E1/2 W1/2 NE1/4 LY N & E OF SANGCHRIS LKAE DITCH PART OF FARM TRACT #30 150583.001 98-08750 72-3353	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,709	2,421	27,245	18,250	52,625		
	2024	4,643	2,629	28,633	18,250	54,155		

15-11-14-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	7878
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	9200

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1998	\$18,296		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-200-004-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

UFFELMAN FARMS INC
%CAROLYN UFFELMAN

2231 GREENBRIAR RD
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$29,671 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-14-200-004-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-200-005-01 153 E 1550 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SZABO MATHEW D & LINDSAY N

Address to send notice if different than shown at left:

153 E 1550 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$79,870** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-14-200-005-01	Class 0010	Acreage 3.410	Print Date 9/23/2024	2023 Taxes: \$ 5,084.68		ESTIMATED	2024 Taxes: \$ 4,858.67
Legal Description BEG SE COR NW1/4 W118' N300' E328' S300' W118' TO BEG & COMM CENTER OF SEC 14 E210' POB N300.09' W328.80' N121.10' E349.03' S431.65' W20' TO	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	12,298	0	71,008	0	83,306	
	2024	12,120	0	67,750	0	79,870	

Land Fair Cash Val: 36,360 Building Fair Cash Val: 203,250 **Non-Farm Value: 239,610**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2000	\$95,000		Yes
04/13/2007	\$3,680	2007R01806	No
06/24/2009	\$219,900	2009R03683	Yes
05/10/2011	\$229,900	2011R02068	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-14-200-005-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-200-007-00 1572 175 EAST PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

UFFELMAN FARMS INC
% CAROYLN UFFELMAN

2231 GREENBRIAR RD
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,003** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: PROPERTY DIVIDED INTO SEPARATE TAX BILLS
RECALCULATION OF FARMLAND ASSESSMENT

Parcel Number 15-11-14-200-007-00	Class 0011	Acreage 39.910	Print Date 9/23/2024	2023 Taxes: \$ 2,952.96		ESTIMATED	2024 Taxes: \$ 2,170.72
Legal Description SE1/4 NE1/4 EX ROW BEG SW COR NE1/4 E1506.56' TO POB THENCE N25.00' NELY50.99' E250.00' SELY50.25' E100.00' SELY50.25' S25.00' W500.00' TO	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	6,603	22,320	15,973	0	44,896	
	2024	6,683	23,953	2,367	0	33,003	

15-11-14-200-007-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Exemption History **Amount**
Tax Year

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/31/2023	\$1,700	2023R02462	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ____ / ____ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-201-001-00 161 E 1550 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOLSEN DEREK B & LISAA

Address to send notice if different than shown at left:

161 E 1550 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$64,620** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-14-201-001-00	Class 0010	Acreage 1.575	Print Date 9/23/2024	2023 Taxes: \$ 3,941.80		ESTIMATED		2024 Taxes: \$ 3,855.63
Legal Description JOYCES PLACE LOTS 1 2003R05345 2001-04560 264X260	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	8,359	1,260	56,311	0	65,930		
	2024	8,257	0	56,363	0	64,620		

Land Fair Cash Val: 24,771 Building Fair Cash Val: 169,089 **Non-Farm Value: 193,860**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/19/2013	\$150,000	2013R03738	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-14-201-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-201-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOLSEN DEREK B & LISA A

Address to send notice if different than shown at left:

161 E 1550 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,913** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-14-201-003-00	Class 0021	Acreage 4.740	Print Date 9/23/2024	2023 Taxes: \$ 82.88		ESTIMATED 2024 Taxes: \$ 257.37	
Legal Description JOYCES PLACE LOT 2 3 & 4 2003R05367 528X260	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	1,260	0	0	1,260	
	2024	0	3,913	0	0	3,913	

15-11-14-201-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/05/2009	\$14,900	2009R05644	Yes
05/24/2012	\$25,000	2012R02822	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-201-004-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOLSEN DEREK B & LISA A

Address to send notice if different than shown at left:

161 E 1550 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,170** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-14-201-004-00	Class 0021	Acreage 1.588	Print Date 9/23/2024	2023 Taxes: \$ 76.96		ESTIMATED		2024 Taxes: \$ 0.00
Legal Description JOYCES PLACE LOT 4 2003R05367 260X265	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	1,170	0	0	1,170		
	2024	0	1,170	0	0	1,170		

15-11-14-201-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/05/2009	\$10,000	2009R05643	Yes
05/24/2012	\$25,000	2012R02822	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-201-005-00 1565 N 175 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KIRKPATRICK TROY L & JULIE A

Address to send notice if different than shown at left:

1565 N 175 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$59,986** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-14-201-005-00	Class 0010	Acreage 3.900	Print Date 9/23/2024	2023 Taxes: \$ 3,485.86		ESTIMATED	2024 Taxes: \$ 3,550.84
Legal Description JOYCES PLACE LOT 5 & BEG SE COR SW1/4 NE1/4 N690 POB W306.81 N216 E307.12 S216 2002-07052 2000-04392 390X266 216X307	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	13,348	0	45,650	0	58,998	
	2024	13,153	0	46,833	0	59,986	

Land Fair Cash Val: 39,459 Building Fair Cash Val: 140,499 **Non-Farm Value: 179,958**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-14-201-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HANSELMAN KAREN & MARCUS

Address to send notice if different than shown at left:

5065 HEATHERDALE LN
DUNWOODY GA 30360

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$55,094** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-14-300-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,382.20		ESTIMATED		2024 Taxes: \$ 3,623.71
Legal Description N1/2 SW1/4 150587.000 87-23646	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	51,422	0	0	51,422		
	2024	0	55,094	0	0	55,094		

15-11-14-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-300-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON MICHAEL W TRUSTEE

Address to send notice if different than shown at left:

2328 TARA LN
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,417** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-14-300-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,484.32		ESTIMATED	2024 Taxes: \$ 1,605.99
Legal Description SW1/4 SW1/4 150588.000 89-8132	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	22,567	0	0	22,567	
	2024	0	24,417	0	0	24,417	

15-11-14-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-300-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

M S FARMS INC

Address to send notice if different than shown at left:

4536 E DIVERNON RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,167** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-14-300-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,597.70		ESTIMATED	2024 Taxes: \$ 1,721.09
Legal Description SE1/4 SW1/4 150589.000 78-18853	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	24,291	0	0	24,291	
	2024	0	26,167	0	0	26,167	

15-11-14-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HANSELMAN KAREN & MARCUS

Address to send notice if different than shown at left:

5065 HEATHERDALE LN
DUNWOODY GA 30360

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,585** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-14-400-001-00	Class 0011	Acreage 39.920	Print Date 9/23/2024	2023 Taxes: \$ 1,887.90		ESTIMATED		2024 Taxes: \$ 2,011.68
Legal Description W42.00AC N1/2 SE1/4 EX 2.08AC 150590.000 87-23646	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	27,953	0	750	28,703		
	2024	0	29,835	0	750	30,585		

15-11-14-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-400-002-00 1529 N 175 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

OCHS MICHAEL H

Address to send notice if different than shown at left:

1529 N 175 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,876** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-14-400-002-00	Class 0010	Acreage 2.080	Print Date 9/23/2024	2023 Taxes: \$ 1,360.92	ESTIMATED			2024 Taxes: \$ 1,373.08
Legal Description S474.32 E118 NW SE & S474.32 W73.76 NE1/4 SE1/4 150590.001 85-11304	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,451	0	22,240	0	31,691		
	2024	9,313	0	22,563	0	31,876		

Land Fair Cash Val: 27,939 Building Fair Cash Val: 67,689 **Non-Farm Value: 95,628**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1985	\$35,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-14-400-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-400-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DOUBLE SS FARMS INC

14302 S COMANCHE RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,379** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-14-400-003-00	Class 0021	Acreage 34.500	Print Date 9/23/2024	2023 Taxes: \$ 1,314.68		ESTIMATED	2024 Taxes: \$ 1,406.17
Legal Description NE1/4 SE1/4 EX 2.00AC W SIDE & EX 3.31AC TR EX ROW BEG NW COR SE1/4 E1767.11' TO POB THENCE E239.45' S25.00' SWLY50.99'	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	19,988	0	0	19,988	
	2024	0	21,379	0	0	21,379	

15-11-14-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/29/2019	\$16,792,275	2019R00312	No
04/17/2020	\$500,000	2020R01281	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-400-003-01 1546 N 175 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VREELAND STEPHEN & DENEAN

Address to send notice if different than shown at left:

1546 N 175 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,173** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-14-400-003-01	Class 0010	Acreage 3.230	Print Date 9/23/2024	2023 Taxes: \$ 2,303.18		ESTIMATED		2024 Taxes: \$ 2,247.67
Legal Description 3.31AC TR LY W OF CREEK NE1/4 SE1/4 EX ROW COM NW COR SE1/4 E1656.56' TO POB THENCE E110.55' S35.00' W60.55' NWLY50.99' N25.00' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	11,517	0	29,500	0	41,017		
	2024	11,740	0	28,433	0	40,173		

Land Fair Cash Val: 35,220 Building Fair Cash Val: 85,299 **Non-Farm Value: 120,519**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1998	\$79,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-14-400-003-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-400-004-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

M S FARMS INC

Address to send notice if different than shown at left:

4536 E DIVERNON RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,498** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-14-400-004-00	Class 0021	Acreage 43.000	Print Date 9/23/2024	2023 Taxes: \$ 1,751.82		ESTIMATED	2024 Taxes: \$ 1,874.41
Legal Description SW1/4 SE1/4 & W3.00AC SE1/4 SE1/4 150589.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	26,634	0	0	26,634	
	2024	0	28,498	0	0	28,498	

15-11-14-400-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-400-005-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

UFFELMAN FARMS INC
% ALBERTA UFFELMAN

2231 GREENBRIAR RD
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,099** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-14-400-005-00	Class 0021	Acreage 37.000	Print Date 9/23/2024	2023 Taxes: \$ 1,477.02		ESTIMATED	2024 Taxes: \$ 1,585.07
Legal Description SE1/4 SE1/4 EX STRIP OFF WEST SIDE 150592.000 91-00443	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	22,456	0	0	22,456	
	2024	0	24,099	0	0	24,099	

15-11-14-400-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-14-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-14-700-001-00	Class 7100	Acreage 639.080	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING ALL EX 1A ALL MINED OUT 157754.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-11-14-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-100-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RIGHT LANE ENVIRONMENTAL LLC
 % RIGHT LANE INDUSTRIES
 STE 725
 2601 S BAYSHORE DR
 COCONUT GROVE FL 33133

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,205** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-15-100-001-01	Class 0083	Acreage 8.913	Print Date 9/23/2024	2023 Taxes: \$ 76.96		ESTIMATED		2024 Taxes: \$ 79.26
Legal Description BEG SE COR NW1/4 W100 N530 W300 N370 E300 N1643.07 W500 N100 E600 S TO POB 97-04276 97-04688	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,170	0	0	0	1,170		
	2024	1,205	0	0	0	1,205		

Land Fair Cash Val: 3,615 Building Fair Cash Val: 0 Non-Farm Value: 3,615

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/29/2008	\$205,000	2008R04520	No
01/23/2017	\$2,450,000	2016R04713	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-15-100-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-100-001-02 23 E 1550 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARDEN JOHN W & CHERI L

Address to send notice if different than shown at left:

23 E 1550 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$74,531** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-15-100-001-02	Class 0011	Acreage 10.000	Print Date 9/23/2024	2023 Taxes: \$ 4,458.58		ESTIMATED	2024 Taxes: \$ 4,507.51
Legal Description BEG SW COR NW1/4 E222.98 TO POB E218.66 N996.09 W218.66 S996.09 TO BEG & BEG SW COR 2000-05376 SW1/4 NW1/4 E441.64 POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,997	6,162	57,628	5,000	73,787	
	2024	4,923	6,575	58,033	5,000	74,531	

15-11-15-100-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2000	\$137,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-100-001-03 1564 N 000 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DENNIS DAMON R & GAIL A

Address to send notice if different than shown at left:

PO BOX 841
PAWNEE

IL 62558

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$90,539 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-11-15-100-001-03

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Rows include IMPROVEMENT ELDERLY and ELDERLY for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-100-001-04 N 000 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARDEN JOHN W & CHERI L

Address to send notice if different than shown at left:

23 E 1550 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,637** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-15-100-001-04	Class 0020	Acreage 10.033	Print Date 9/23/2024	2023 Taxes: \$ 1,177.08		ESTIMATED		2024 Taxes: \$ 1,160.04
Legal Description BEG NW COR NW1/4 E662.26 S660 W662.26 N660 TO BEG 2001-05155	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	17,896	0	0	0	17,896		
	2024	17,637	0	0	0	17,637		

Land Fair Cash Val: 52,911 Building Fair Cash Val: 0 **Non-Farm Value: 52,911**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2001	\$35,000		Yes
09/29/2005	\$41,000	2005R05572	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-15-100-001-04

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-100-001-05 1578 N 000 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

KERN STEVEN & CANDICE

Address to send notice if different than shown at left:

1578 N 000 EAST RD
PAWNEE IL 62558

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$86,190 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 46,419 Building Fair Cash Val: 212,151 Non-Farm Value: 258,570

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Exemption History, Amount, Tax Year 2023, Tax Year 2024.

Table with columns: Sales History, Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-11-15-100-001-05

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-100-001-06 35 E 1550 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GAREE ROBERT J & SARA M

Address to send notice if different than shown at left:

35 E 1550 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$91,732** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-15-100-001-06	Class 0011	Acreage 5.371	Print Date 9/23/2024	2023 Taxes: \$ 5,980.96		ESTIMATED	2024 Taxes: \$ 5,638.88
Legal Description BEG SE COR NW1/4 W805' TO POB W260' N900' E260' S900' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	11,186	1,179	84,568	0	96,933	
	2024	11,020	1,289	79,423	0	91,732	

15-11-15-100-001-06

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/15/2005	\$24,500	2005R02139	Yes
06/25/2009	\$252,500	2009R03716	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-100-001-07 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

LANGHEIM REESE N

Address to send notice if different than shown at left:

PO BOX 297
PAWNEE

IL 62558

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$3,006 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-11-15-100-001-07

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Rows for 05/06/2005 and 02/26/2008)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-100-001-08 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GAREE ROBERT J & SARA M

Address to send notice if different than shown at left:

35 E 1550 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,661** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-15-100-001-08	Class 0021	Acreage 5.370	Print Date 9/23/2024	2023 Taxes: \$ 160.82	ESTIMATED			2024 Taxes: \$ 175.02
Legal Description BEG SE COR NW1/4 W1065' TO POB W260' N900' E260' S900' TO POB 2005R02279	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	2,445	0	0	2,445		
	2024	0	2,661	0	0	2,661		

15-11-15-100-001-08

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/09/2012	\$53,710	2012R00716	No
06/14/2013	\$53,710	2013R02556	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-100-001-09 47 E 1550 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WANGEN ROBERT G & BROOKE M

Address to send notice if different than shown at left:

47 E 1550 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$70,137** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-15-100-001-09	Class 0011	Acreage 6.640	Print Date 9/23/2024	2023 Taxes: \$ 4,172.86		ESTIMATED		2024 Taxes: \$ 4,218.50
Legal Description BEG SE COR NW1/4 W100' TO POB W445' N900' E145' S370' E300' S530' TO POB 2005R02279	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,802	3,018	58,623	0	69,443		
	2024	7,687	3,227	59,223	0	70,137		

15-11-15-100-001-09

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/11/2005	\$28,000	2005R02692	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-100-001-10 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LANGHEIM REESE N

Address to send notice if different than shown at left:

PO BOX 297
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$62,206** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-15-100-001-10	Class 0011	Acreage 85.641	Print Date 9/23/2024	2023 Taxes: \$ 3,848.92		ESTIMATED		2024 Taxes: \$ 4,091.49
Legal Description BEG SE COR NW1/4 W1325' TO POB W447.41' N508.24' W425.21' N265' E331.68' N352.98' W120.04' N1516.01' E1382.28' S100 E500' S1643.07' W1225' S900' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	52,018	0	6,500	58,518		
	2024	0	55,706	0	6,500	62,206		

15-11-15-100-001-10

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
05/18/2005	\$103,500	2005R02836	No
05/18/2005	\$206,500	2005R02837	No
02/26/2008	\$536,000	2008R00884	No
05/04/2010	\$10,000	2010R01885	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-100-002-00 1560 N 000 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ALDRICH MITCHEL D

Address to send notice if different than shown at left:

1560 N 000 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$51,473** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-15-100-002-00	Class 0010	Acreage 2.370	Print Date 9/23/2024	2023 Taxes: \$ 3,112.66	ESTIMATED			2024 Taxes: \$ 2,990.91
Legal Description N516.81 S812.7 W200 SW1/4 NW1/4 150596.000 94-05955 73-8748 9405955	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	10,070	0	43,254	0	53,324		
	2024	9,923	0	41,550	0	51,473		

Land Fair Cash Val: 29,769 Building Fair Cash Val: 124,650 **Non-Farm Value: 154,419**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/24/2018	\$130,000	2018R03128	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-15-100-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-100-002-00 1560 N 000 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CALIBER HOME LOANS

STE 180
3701 REGENT BLVD
IRVING TX 75063

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$51,473** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-15-100-002-00	Class 0010	Acreage 2.370	Print Date 9/23/2024	2023 Taxes: \$ 3,112.66	ESTIMATED			2024 Taxes: \$ 2,990.91
Legal Description N516.81 S812.7 W200 SW1/4 NW1/4 150596.000 94-05955 73-8748 9405955	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	10,070	0	43,254	0	53,324		
	2024	9,923	0	41,550	0	51,473		

Land Fair Cash Val: 29,769 Building Fair Cash Val: 124,650 **Non-Farm Value: 154,419**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/24/2018	\$130,000	2018R03128	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-15-100-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-100-003-00 1556 N 000 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WHITE GARY D

Address to send notice if different than shown at left:

1556 N 000 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$57,837** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-15-100-003-00	Class 0010	Acreage 2.240	Print Date 9/23/2024	2023 Taxes: \$ 2,413.50		ESTIMATED		2024 Taxes: \$ 3,409.49
Legal Description S486 W200 W1/2 NW1/4 150595.000 87-20071 720 P27	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,792	0	40,520	0	50,312		
	2024	9,650	0	48,187	0	57,837		

Land Fair Cash Val: 28,950 Building Fair Cash Val: 144,561 **Non-Farm Value: 173,511**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 7618
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/08/2014	\$165,000	2014R00068	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-15-100-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WANGEN RUSSELL K

Address to send notice if different than shown at left:

PO BOX 603
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,800** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-15-200-001-00	Class 0083	Acreage 10.000	Print Date 9/23/2024	2023 Taxes: \$ 370.30		ESTIMATED		2024 Taxes: \$ 381.49
Legal Description BEG SE COR NE1/4 W903.64' POB W1742.40' N250' E1742.40' S250' TO POB 1997R04276 150594.003	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,630	0	0	0	5,630		
	2024	5,800	0	0	0	5,800		

Land Fair Cash Val: 17,400 Building Fair Cash Val: 0 **Non-Farm Value: 17,400**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/14/2006	\$449,760	2006R03396	No
04/21/2008	\$36,970	2008R02038	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-15-200-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-200-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RIGHT LANE ENVIRONMENTAL LLC
 % RIGHT LANE INDUSTRIES
 STE 725
 2601 S BAYSHORE DR
 COCONUT GROVE FL 33133

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,960** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-15-200-001-01	Class 0083	Acreage 144.820	Print Date 9/23/2024	2023 Taxes: \$ 125.18		ESTIMATED		2024 Taxes: \$ 128.92
Legal Description NE1/4 EX S250 97-04276 97-04688	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,903	0	0	0	1,903		
	2024	1,960	0	0	0	1,960		

Land Fair Cash Val: 5,880 Building Fair Cash Val: 0 **Non-Farm Value: 5,880**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/29/2008	\$205,000	2008R04520	No
12/13/2016	\$2,450,000	2016R04713	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-15-200-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-200-001-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON TODD N & AUBRIE M

Address to send notice if different than shown at left:

5864 E DIVERNON RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,422** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-15-200-001-02	Class 0083	Acreage 5.000	Print Date 9/23/2024	2023 Taxes: \$ 537.84		ESTIMATED		2024 Taxes: \$ 553.94
Legal Description BEG SE COR NE1/4 W903.64' N250' E903.50' S250' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	8,177	0	0	0	8,177		
	2024	8,422	0	0	0	8,422		

Land Fair Cash Val: 25,266 Building Fair Cash Val: 0 **Non-Farm Value: 25,266**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/16/2007	\$28,900	2007R04017	Yes
04/09/2010	\$28,900	2010R01517	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-15-200-001-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

RICHESON JOHN M & TERRY L

Address to send notice if different than shown at left:

46 E 1550 NORTH RD
PAWNEE IL 62558

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$56,854 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed breakdown table for 2023 and 2024 valuations by category (HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL).

15-11-15-300-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-300-002-00 46 E 1550 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RICHESON JOHN M & TERRY L

Address to send notice if different than shown at left:

46 E 1550 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$57,667** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-15-300-002-00	Class 0010	Acreage 2.406	Print Date 9/23/2024	2023 Taxes: \$ 2,570.16		ESTIMATED		2024 Taxes: \$ 3,069.44
Legal Description PRT NE1/4 SW1/4 BEG 15.24'W NE COR TH S220.30 W475.83' N220.30 E475.78' TO POB 2002R00227 150600.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	10,136	0	39,940	0	50,076		
	2024	9,987	0	47,680	0	57,667		

Land Fair Cash Val: 29,961 Building Fair Cash Val: 143,040 **Non-Farm Value: 173,001**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-15-300-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-300-003-00 51 E 1500 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCTAGGART JOHN T & BONNIE S TTEES

Address to send notice if different than shown at left:

4341 GALLOWAY RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,818** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-15-300-003-00	Class 0021	Acreage 50.000	Print Date 9/23/2024	2023 Taxes: \$ 2,138.04		ESTIMATED	2024 Taxes: \$ 2,290.09
Legal Description BEG SW COR SW1/4 E827.27' N1317.36' TO POB E1713.05' S984.57' W233.64' S336.51' W1473.69' TO POB 2001R00286 150601.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	32,506	0	0	32,506	
	2024	0	34,818	0	0	34,818	

15-11-15-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Exemption History Amount
Tax Year

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
03/19/2013	\$520,650	2013R01194	No
03/19/2013	\$520,650	2013R01193	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-300-003-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

REYNOLDS CAROL

Address to send notice if different than shown at left:

3549 W WASHINGTON ST
SPRINGFIELD IL 62711

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$18,296 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-11-15-300-003-01

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RICHESON JOHN M & TERRY L

Address to send notice if different than shown at left:

46 E 1550 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$50,112** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-15-400-001-00	Class 0021	Acreage 70.000	Print Date 9/23/2024	2023 Taxes: \$ 3,085.82		ESTIMATED	2024 Taxes: \$ 3,296.03
Legal Description N1/2 SE1/4 EX BEG SE COR SE1/4 N1321.21 POB W295.16 N295.16 E295.16 S295.16 TO THE POB 2003R00439 2002R05931 150602.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	46,916	0	0	46,916	
	2024	0	50,112	0	0	50,112	

15-11-15-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-400-001-01 1530 N 100 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME JOSEPH LOWELL JR

Address to send notice if different than shown at left:

1530 N 100 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$85,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-15-400-001-01	Class 0010	Acreage 2.000	Print Date 9/23/2024	2023 Taxes: \$ 5,576.98	ESTIMATED			2024 Taxes: \$ 5,239.04
Legal Description BEG SE COR SE1/4 N1321.42 POB W295.16 N295.16 E295.16 S295.16 TO THE POB 2004R04808	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,278	0	81,513	0	90,791		
	2024	9,143	0	76,510	0	85,653		

Land Fair Cash Val: 27,429 Building Fair Cash Val: 229,530 **Non-Farm Value: 256,959**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2004	\$4,000		Yes
05/04/2015	\$247,000	2015R01696	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-15-400-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-400-002-00 51 E 1500 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FIRST NATIONAL BANK

700 CARROLL
PO BOX 469
PAWNEE

IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$60,038** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-15-400-002-00	Class 0011	Acreage 5.720	Print Date 9/23/2024	2023 Taxes: \$ 3,051.10		ESTIMATED		2024 Taxes: \$ 3,948.90
Legal Description W1/2 SW1/4 SE1/4 2001R00286 1989R09801 150601.001		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	7,437	1,470	15,981	21,500	46,388	
		2024	7,330	1,581	29,627	21,500	60,038	

15-11-15-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/24/2014	\$5,000	2014R05582	No
12/24/2014	\$2,500	2014R05583	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-400-002-00 51 E 1500 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCTAGGART DEBORAH A

Address to send notice if different than shown at left:

5564 E DIVERNON RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$60,038** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-15-400-002-00	Class 0011	Acreage 5.720	Print Date 9/23/2024	2023 Taxes: \$ 3,051.10		ESTIMATED		2024 Taxes: \$ 3,948.90
Legal Description W1/2 SW1/4 SE1/4 2001R00286 1989R09801 150601.001		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	7,437	1,470	15,981	21,500	46,388	
		2024	7,330	1,581	29,627	21,500	60,038	

15-11-15-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/24/2014	\$5,000	2014R05582	No
12/24/2014	\$2,500	2014R05583	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ____ / ____ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-400-002-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCTAGGART JOHN T & BONNIE S TTEES

Address to send notice if different than shown at left:

4341 GALLOWAY RD
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,154** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-15-400-002-01	Class 0021	Acreage 10.000	Print Date 9/23/2024	2023 Taxes: \$ 505.54		ESTIMATED	2024 Taxes: \$ 536.32
Legal Description BEG SW COR SW1/4 E2300.97' TO POB N336.41' E233.64'N984.57' E84.34' E328.19' S1019.42' W616.82' S306.09' W30' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	7,686	0	0	7,686	
	2024	0	8,154	0	0	8,154	

15-11-15-400-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
03/19/2013	\$520,650	2013R01194	No
03/19/2013	\$520,650	2013R01193	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-400-002-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCTAGGART JOHN T & BONNIE S TTEES

Address to send notice if different than shown at left:

4341 GALLOWAY RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,764** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-15-400-002-02	Class 0021	Acreage 8.600	Print Date 9/23/2024	2023 Taxes: \$ 418.38	ESTIMATED			2024 Taxes: \$ 444.89
Legal Description BEG SW COR SECTION 15 E2330.97' TO POB N306.09' E616.82' N1019.42' E331.27' S1053.34' W918.26' S275.78' W30' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	6,361	0	0	6,361		
	2024	0	6,764	0	0	6,764		

15-11-15-400-002-02

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/19/2013	\$48,375	2013R01195	No
11/17/2016	\$90,300	2016R04337	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-400-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON MARY H MARITAL TR
%MICHAEL MEGGINSON TRUSTEE

2328 TARA LN
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,759** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-15-400-003-00	Class 0021	Acreage 60.000	Print Date 9/23/2024	2023 Taxes: \$ 2,500.70		ESTIMATED	2024 Taxes: \$ 2,680.85
Legal Description E3/4 S1/2 SE1/4 150603.000 89-8133	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	38,020	0	0	38,020	
	2024	0	40,759	0	0	40,759	

15-11-15-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-15-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$10 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for tax breakdown by year (2023, 2024) and category (FARM LAND, BUILDINGS, FARM BLDGS, TOTAL).

15-11-15-700-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-22-100-001-00 1476 N 000 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAVIS CHARLES A

Address to send notice if different than shown at left:

72 E 1000 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$82,952** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-22-100-001-00	Class 0011	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 5,299.56		ESTIMATED	2024 Taxes: \$ 5,456.03
Legal Description W1/2 NW1/4 150608.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,851	48,629	22,228	0	75,708	
	2024	4,783	52,359	25,810	0	82,952	

15-11-22-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-22-100-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DUNN KELLY R & LORETTA A

N6086 GRAYHAWK RD
ONALASKA WI 54650

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$54,411** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-22-100-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,640.84		ESTIMATED	2024 Taxes: \$ 3,578.79
Legal Description E1/2 NW1/4 99-00129 98-00061 150607.000 2001-00075 2000-00138 97-01815&16	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	50,489	0	0	50,489	
	2024	0	54,411	0	0	54,411	

15-11-22-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-22-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MEGGINSON BRYAN M & CHAD M
%BRYAN M MEGGINSON

73 E 1400 NORTH RD
PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$53,594 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-22-200-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 12/24/2008, \$488,000, 2008R06402, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-22-200-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON MICHAEL W TRUSTEE

Address to send notice if different than shown at left:

2328 TARA LN
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$51,787** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-22-200-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,356.14		ESTIMATED		2024 Taxes: \$ 3,406.20
Legal Description E 1/2 NE 1/4 150604.000 89-8132	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	47,985	0	0	47,985		
	2024	0	51,787	0	0	51,787		

15-11-22-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-22-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MEGGINSON MICHAEL W TRUSTEE

Address to send notice if different than shown at left:

2328 TARA LN
SPRINGFIELD IL 62704

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$102,991 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-22-300-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-22-400-001-00 73 E 1400 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON MICHAEL W TRUSTEE

Address to send notice if different than shown at left:

2328 TARA LN
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$191,752** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-22-400-001-00	Class 0011	Acreage 160.000	Print Date 9/23/2024	2023 Taxes: \$ 12,206.84		ESTIMATED		2024 Taxes: \$ 12,217.52
Legal Description SE1/4 1989R08132 150611.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	10,734	85,035	53,090	33,000	181,859		
	2024	10,577	92,668	55,507	33,000	191,752		

15-11-22-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-22-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-22-700-001-00	Class 7100	Acreage 640.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING ALL SEC ALL MINED OUT 157756.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-11-22-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-23-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON MICHAEL W TRUSTEE

Address to send notice if different than shown at left:

2328 TARA LN
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$54,011** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-23-100-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,308.92		ESTIMATED	2024 Taxes: \$ 3,552.48
Legal Description W1/2 NW1/4 150615.000 89-8132	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	50,308	0	0	50,308	
	2024	0	54,011	0	0	54,011	

15-11-23-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-23-100-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON CHAD M
 % MICHAEL W & SANDRA C MEGGINSON

 4536 E DIVERNON RD
 PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,409** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-23-100-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,811.00		ESTIMATED		2024 Taxes: \$ 1,934.33
Legal Description NE 1/4 NW 1/4 150614.000 2004R00438 2003R10066 1994R03904 1993R07889	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	27,534	0	0	27,534		
	2024	0	29,409	0	0	29,409		

15-11-23-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --
 Signed: _____ Date ____ / ____ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-23-100-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON MICHAEL W TRUSTEE

Address to send notice if different than shown at left:

2328 TARA LN
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,831** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-23-100-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,707.28		ESTIMATED	2024 Taxes: \$ 1,830.54
Legal Description SE1/4 NW1/4 150610.000 89-8132 87-23523	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	25,957	0	0	25,957	
	2024	0	27,831	0	0	27,831	

15-11-23-100-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-23-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON CHAD M
 % MICHAEL W & SANDRA C MEGGINSON

 4536 E DIVERNON RD
 PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,364** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-23-200-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,812.58		ESTIMATED	2024 Taxes: \$ 1,931.37
Legal Description NW1/4 NE1/4 150614.001 2004R00438 2003R10066 1994R03904 1993R07889	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	27,558	0	0	27,558	
	2024	0	29,364	0	0	29,364	

15-11-23-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-23-200-002-00 1496 N 175 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN CAROLYN R TTEE

Address to send notice if different than shown at left:

1496 N 175 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$121,594** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: FARM OUT BUILDING REMOVED
A REVALUATION OF PROPERTY.

Parcel Number 15-11-23-200-002-00	Class 0011	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 7,127.92	ESTIMATED			2024 Taxes: \$ 7,274.13
Legal Description NE1/4 NE1/4 150612.000 2001-03026 72-137 98-06704	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	19,067	16,766	72,738	10,800	119,371		
	2024	19,300	17,214	74,280	10,800	121,594		

15-11-23-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY OWNER OCCUPD	5000 6000
2024	ELDERLY OWNER OCCUPD	5000 6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-23-200-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON MICHAEL W TRUSTEE

Address to send notice if different than shown at left:

2328 TARA LN
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,624** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-23-200-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,895.98		ESTIMATED		2024 Taxes: \$ 2,014.24
Legal Description SW1/4 NE1/4 150610.001 89-8132 87-23523	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	28,826	0	0	28,826		
	2024	0	30,624	0	0	30,624		

15-11-23-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-23-200-004-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ORLANDINI GINO TRUST
% DOMINIC ORLANDINI

9320 FREEDOM WAY NE
ALBUQUERQUE NM 87109

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,175** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-23-200-004-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,799.76		ESTIMATED	2024 Taxes: \$ 1,918.94
Legal Description SE1/4 NE1/4 150613.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	27,363	0	0	27,363	
	2024	0	29,175	0	0	29,175	

15-11-23-200-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-23-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON MICHAEL W TRUSTEE

Address to send notice if different than shown at left:

2328 TARA LN
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$109,016** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-23-300-001-00	Class 0021	Acreage 160.400	Print Date 9/23/2024	2023 Taxes: \$ 6,985.08		ESTIMATED	2024 Taxes: \$ 7,170.34
Legal Description SW1/4 150617.000 89-8132	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	101,334	0	0	101,334	
	2024	0	109,016	0	0	109,016	

15-11-23-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-23-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON MICHAEL W TRUSTEE

Address to send notice if different than shown at left:

2328 TARA LN
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$59,664** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-23-400-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,690.48		ESTIMATED	2024 Taxes: \$ 3,924.30
Legal Description W1/2 SE1/4 150617.001 89-8132	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	56,109	0	0	56,109	
	2024	0	59,664	0	0	59,664	

15-11-23-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-23-400-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

FRISINA JAMES JR

Address to send notice if different than shown at left:

PO BOX 732
TAYLORVILLE

IL 62568

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$28,136 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-23-400-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Four vertical lines for entering assessed valuations.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-23-400-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOARMAN THOMAS L & CINDY L TTEES

Address to send notice if different than shown at left:

403 CARROLL ST
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,038** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-23-400-003-00	Class 0021	Acreage 10.000	Print Date 9/23/2024	2023 Taxes: \$ 498.18		ESTIMATED		2024 Taxes: \$ 528.69
Legal Description W1/2 W1/2 SE1/4 SE1/4 150618.00 2000-07586	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	7,574	0	0	7,574		
	2024	0	8,038	0	0	8,038		

15-11-23-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
07/17/2006	\$102,000	2006R03446	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-23-400-004-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOARMAN THOMAS L & CINDY L TTEES

Address to send notice if different than shown at left:

403 CARROLL ST
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,829** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-23-400-004-00	Class 0021	Acreage 10.000	Print Date 9/23/2024	2023 Taxes: \$ 484.42		ESTIMATED 2024 Taxes: \$ 514.94	
Legal Description E1/2 W1/2 SE1/4 SE1/4 150618.002 2000-07587	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	7,365	0	0	7,365	
	2024	0	7,829	0	0	7,829	

15-11-23-400-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/17/2006	\$102,000	2006R03446	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-23-400-005-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILLER DIANE ORLANDINI FAMLY LLC
%DIANE M MILLER

6117 GREENWALT DR
SPRINGFIELD IL 62711

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,014** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-23-400-005-00	Class 0021	Acreage 18.590	Print Date 9/23/2024	2023 Taxes: \$ 864.92		ESTIMATED	2024 Taxes: \$ 921.75
Legal Description E1/2 SE1/4 SE1/4 EX 1.41AC 150618.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	13,150	0	0	13,150	
	2024	0	14,014	0	0	14,014	

15-11-23-400-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-23-400-006-00 195 E 1400 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOWARD CHRISTOPHER L

Address to send notice if different than shown at left:

195 E 1400 NORTH RD
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,743** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-23-400-006-00	Class 0010	Acreage 1.410	Print Date 9/23/2024	2023 Taxes: \$ 962.46	ESTIMATED			2024 Taxes: \$ 969.70
Legal Description BEG 122W SE CR SE1/4 RN W218 N281 E218 S281 TO BEG 150618.001 B237 P443	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	8,015	0	12,618	0	20,633		
	2024	7,900	0	12,843	0	20,743		

Land Fair Cash Val: 23,700 Building Fair Cash Val: 38,529 **Non-Farm Value: 62,229**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/23/2019	\$30,000	2019R03254	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-23-400-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-23-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$10 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-11-23-700-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-24-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

EGGIMANN CAROLYN R TTEE

Address to send notice if different than shown at left:

1496 N 175 EAST RD
PAWNEE IL 62558

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$30,365 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: RECALCULATION OF FARMLAND ASSESSMENT

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for legal description with columns for Year, Homesite/Lots, Farm Land, Buildings, Farm Bldgs, and Total.

15-11-24-100-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-24-100-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

UFFELMAN FARMS INC
%CAROLYN RANDALL

2231 GREENBRIAR RD
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$53,862** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-24-100-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,296.10		ESTIMATED		2024 Taxes: \$ 3,542.68
Legal Description E 1/2 NW 1/4 2002-07692 150622.000 2001-08538 2000-06606 98-06704 98-08272 72-137	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	50,113	0	0	50,113		
	2024	0	53,862	0	0	53,862		

15-11-24-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/23/2014	\$1,075,500	2014R01878	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-24-100-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILLER DIANE ORLANDINI FAMILY LLC
%DIANE M MILLER

6117 GREENWALT DR
SPRINGFIELD IL 62711

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,805** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-24-100-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,969.26		ESTIMATED	2024 Taxes: \$ 2,091.92
Legal Description SW1/4 NW1/4 150624.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	29,940	0	0	29,940	
	2024	0	31,805	0	0	31,805	

15-11-24-100-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-24-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

UFFELMAN FARMS INC
%CAROLYN UFFELMAN

2231 GREENBRIAR RD
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$57,309 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-24-200-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Four horizontal lines for estimated valuations.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-24-200-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON FAMILY LAND TRUST #13
%MICHAEL W MEGGINSON AS TRUSTEE

2328 TARA LN
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,939** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-24-200-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,751.40		ESTIMATED	2024 Taxes: \$ 1,837.64
Legal Description SE1/4 NE1/4 2004R00438 150620.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	26,066	0	0	26,066	
	2024	0	27,939	0	0	27,939	

15-11-24-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1990	\$184,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-24-200-002-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON VICKI S TRUST

Address to send notice if different than shown at left:

3105 IRONOAK CIR
SPRINGFIELD IL 62711

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,070** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-24-200-002-01	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,891.10		ESTIMATED	2024 Taxes: \$ 1,977.80
Legal Description NE1/4 NE1/4 2003R10033 QCD	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	28,190	0	0	28,190	
	2024	0	30,070	0	0	30,070	

15-11-24-200-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-24-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

STAAB DAVID

Address to send notice if different than shown at left:

918 HILLCREST RD
ROCHESTER IL 62563

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$56,012 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-24-300-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-24-300-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MEGGINSON BRYAN M ETAL

Address to send notice if different than shown at left:

6194 E MONTGOMERY RD
PAWNEE IL 62558

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$55,442 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-24-300-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 03/15/2016, 160,000,000, 2016R00932, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-24-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON MICHAEL W TRUSTEE

Address to send notice if different than shown at left:

2328 TARA LN
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$138,865** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-24-400-001-00	Class 0011	Acreage 160.000	Print Date 9/23/2024	2023 Taxes: \$ 8,760.52		ESTIMATED	2024 Taxes: \$ 9,133.61
Legal Description SE1/4 150627.000 89-8132 85-7322	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	101,428	0	30,000	131,428	
	2024	0	108,865	0	30,000	138,865	

15-11-24-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-24-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-24-700-001-00	Class 7100	Acreage 640.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING ALL SECTION 24 13-4W ALL MINED OUT 157758.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-11-24-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-25-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BOARMAN BROTHERS LAND HOLDING LLC
%MICHAEL E BOARMAN

5815 BOARMAN RD
PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$30,346 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-25-100-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 07/17/2006, \$204,000, 2006R03444, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-25-100-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOEKER DAVID L

Address to send notice if different than shown at left:

21 BLACKBERRY LN
MORTON IL 61550

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,563** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-25-100-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,561.74		ESTIMATED		2024 Taxes: \$ 1,678.77
Legal Description NE 1/4 NW 1/4 2004R03240 88-342 150634.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	24,711	0	0	24,711		
	2024	0	26,563	0	0	26,563		

15-11-25-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/23/2021	\$849,474	2021R03073	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-25-100-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WOLF PATRICK K TR

Address to send notice if different than shown at left:

345 E 750 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$53,236** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-25-100-003-00	Class 0021	Acreage 80.980	Print Date 9/23/2024	2023 Taxes: \$ 3,124.72		ESTIMATED	2024 Taxes: \$ 3,364.49
Legal Description S1/2 NW1/4 AND W33' NW1/4 NE1/4 150636.000 77-13582	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	49,442	0	0	49,442	
	2024	0	53,236	0	0	53,236	

15-11-25-100-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/11/2015	\$540,500	2015R00885	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-25-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

KUTZLER JANEL WOLF TRUSTEE
JANEL W KUTZLER TRUST

44 CHUKAR DR
CHATHAM IL 62629

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$25,496 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-11-25-200-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow pointing up)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-25-200-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOBEAN LLC SERIES PAWNEE
% MATTHEW G & JILL M GINDER

400 OAK VALLEY DR
GOODFIELD IL 61742

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,140** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-25-200-002-00	Class 0021	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 815.88		ESTIMATED	2024 Taxes: \$ 830.44
Legal Description W1/2 NE1/4 NE1/4 150628.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	12,158	0	0	12,158	
	2024	0	13,140	0	0	13,140	

15-11-25-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/18/2023	\$373,500	2023R03714	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-25-200-002-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

2001 GINDER FAMILY TRUST
% STEVEN GINDER L GINDER

1123 N RIDGE AVE
ARLINGTON HTS IL 60004

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,058** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-25-200-002-01	Class 0021	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 643.12		ESTIMATED	2024 Taxes: \$ 698.86
Legal Description E 1/2 NE 1/4 NE 1/4 150628.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	10,176	0	0	10,176	
	2024	0	11,058	0	0	11,058	

15-11-25-200-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/18/2023	\$346,500	2023R03707	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-25-200-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

FRISINA RE FY TRUST
%CYNTHIA FRISINA

9645 NESBIT LAKES DR
ALPHARETTA GA 30022

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$24,406 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-25-200-003-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-25-200-004-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MALTBY VERNON L & CATHERINE L CO TRUS
LORI A SPELMAN CO TRUSTEES

3150 E DIVERNON RD
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,192** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-25-200-004-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,523.16		ESTIMATED	2024 Taxes: \$ 1,592.12
Legal Description S1/2 S1/2 NE1/4 99-02655 150630.000 95-06356 94-3057 94-03058 & 59	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	23,316	0	0	23,316	
	2024	0	25,192	0	0	25,192	

15-11-25-200-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-25-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC
%JOSEPH A BLOOME PRES

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$49,612** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-25-300-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 2,900.30		ESTIMATED	2024 Taxes: \$ 3,135.46
Legal Description W1/2 SW1/4 150637.001 91-03678	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	45,891	0	0	45,891	
	2024	0	49,612	0	0	49,612	

15-11-25-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/01/1991	\$190,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-25-300-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LAMB GLORIA C TR

Address to send notice if different than shown at left:

6 TURNBERRY PL
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-25-300-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,535.70		ESTIMATED	2024 Taxes: \$ 1,653.30
Legal Description W1/2 E1/2 SW1/4 150637.000 86-13866	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	24,299	0	0	24,299	
	2024	0	26,160	0	0	26,160	

15-11-25-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-25-300-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LAMB GLORIA C TR

6 TURNBERRY PL
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,730** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-25-300-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,508.58		ESTIMATED	2024 Taxes: \$ 1,626.13
Legal Description E1/2 E1/2 SW1/4 150637.002 89-10198	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	23,870	0	0	23,870	
	2024	0	25,730	0	0	25,730	

15-11-25-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1989	\$80,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-25-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MALTBY VERNON L & CATHERINE L CO TRUS
LORI A SPELMAN CO TRUSTEES

3150 E DIVERNON RD
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,303** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-25-400-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,403.22		ESTIMATED	2024 Taxes: \$ 1,472.74
Legal Description N1/2 N1/2 SE1/4 150630.001 95-06356 99-02655 94-03059	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	21,418	0	0	21,418	
	2024	0	23,303	0	0	23,303	

15-11-25-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-25-400-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLEAR CREEK FARMS LLC

Address to send notice if different than shown at left:

4395 E DIVERNON RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,294** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-25-400-002-00	Class 0021	Acreage 36.900	Print Date 9/23/2024	2023 Taxes: \$ 1,348.62		ESTIMATED	2024 Taxes: \$ 1,345.77
Legal Description E1/2 W1/2 S3/4 SE1/4 EX E270 S500 W1/2 S3/4 150638.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	19,686	0	0	19,686	
	2024	0	21,294	0	0	21,294	

15-11-25-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/23/2014	\$55,000	2014R02722	No
12/18/2023	\$938,850	2023R03709	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-25-400-002-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME CLAYTON T & CHRISTY

Address to send notice if different than shown at left:

4395 E DIVERNON RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$134,414** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-25-400-002-01	Class 0011	Acreage 63.100	Print Date 9/23/2024	2023 Taxes: \$ 6,561.44		ESTIMATED	2024 Taxes: \$ 8,494.91
Legal Description E1/2 S3/4 SE1/4 & E270 S500 W1/2 S3/4	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	32,614	0	71,000	103,614	
	2024	0	35,414	0	99,000	134,414	

15-11-25-400-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/09/2012	\$720,000	2012R04494	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-25-400-002-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLEAR CREEK FARMS LLC

Address to send notice if different than shown at left:

4395 E DIVERNON RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,549** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-25-400-002-02	Class 0021	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 734.52		ESTIMATED	2024 Taxes: \$ 793.09
Legal Description W1/2 W1/2 S3/4 SE1/4 150638.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	11,622	0	0	11,622	
	2024	0	12,549	0	0	12,549	

15-11-25-400-002-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/18/2023	\$938,850	2023R03709	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-25-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-25-700-001-00	Class 7100	Acreage 479.250	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING ALL EX SW & 3/4 IN SE COR 157759.000 ALL MINED OUT	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-11-25-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CASHEN CARL V TRUSTEE

Address to send notice if different than shown at left:

311 BUTLER LN
CHATHAM IL 62629

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,452** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-26-100-001-00	Class 0021	Acreage 40.080	Print Date 9/23/2024	2023 Taxes: \$ 1,617.02		ESTIMATED	2024 Taxes: \$ 1,608.29
Legal Description E1/2 W1/2 NW1/4 150644.000 96-01907	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	22,152	0	0	22,152	
	2024	0	24,452	0	0	24,452	

15-11-26-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-100-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON TODD & AUBRIE

Address to send notice if different than shown at left:

5864 E DIVERNON RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,398** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-26-100-001-01	Class 0021	Acreage 40.100	Print Date 9/23/2024	2023 Taxes: \$ 1,656.16		ESTIMATED		2024 Taxes: \$ 1,604.74
Legal Description W1/2 W1/2 NW1/4 150644.000 96-01907	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	22,747	0	0	22,747		
	2024	0	24,398	0	0	24,398		

15-11-26-100-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/30/2020	\$441,045	2020R05271	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-100-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON INC

Address to send notice if different than shown at left:

5864 E DIVERNON RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$50,591** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-26-100-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,391.68		ESTIMATED	2024 Taxes: \$ 3,327.54
Legal Description E1/2 NW1/4 150644.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	46,701	0	0	46,701	
	2024	0	50,591	0	0	50,591	

15-11-26-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DDS FARMS INC
% DAVID D SKINNER

909 TRAMORE PL
PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$27,996 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-11-26-200-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 11/14/2012, \$500,000, 2012R06280, No)

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-200-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FRISINA JAMES JR

Address to send notice if different than shown at left:

7528 CROOKED STICK DR
DIAMONDHEAD MS 39525

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,700** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-26-200-001-01	Class 0021	Acreage 30.000	Print Date 9/23/2024	2023 Taxes: \$ 1,284.42		ESTIMATED		2024 Taxes: \$ 1,371.43
Legal Description E1/4 NW1/4 NE1/4 & W1/2 NE1/4 NE1/4	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	20,323	0	0	20,323		
	2024	0	21,700	0	0	21,700		

15-11-26-200-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-200-001-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FRISINA RE FY TRUST
%CYNTHIA FRISINA

9645 NESBIT LAKES DR
ALPHARETTA GA 30022

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,546** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-26-200-001-02	Class 0021	Acreage 30.000	Print Date 9/23/2024	2023 Taxes: \$ 1,154.48		ESTIMATED	2024 Taxes: \$ 1,235.30
Legal Description W3/4 NW1/4 NE1/4	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	18,267	0	0	18,267	
	2024	0	19,546	0	0	19,546	

15-11-26-200-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-200-001-03

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOARMAN MICHAEL E & SHEILA E TR

Address to send notice if different than shown at left:

4515 BIRMINGHAM DR
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,379** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-26-200-001-03	Class 0021	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 787.40		ESTIMATED		2024 Taxes: \$ 845.55
Legal Description E1/2 NE1/4 NE1/4	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	12,459	0	0	12,459		
	2024	0	13,379	0	0	13,379		

15-11-26-200-001-03

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/14/2012	\$250,000	2012R06278	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --
Signed: _____ Date ____ / ____ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-200-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DDS FARMS INC
% DAVID SKINNER

909 TRAMORE PL
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,710** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-26-200-002-00	Class 0021	Acreage 25.000	Print Date 9/23/2024	2023 Taxes: \$ 1,049.62		ESTIMATED	2024 Taxes: \$ 1,119.26
Legal Description THAT PART W1/2 SW1/4 NE1/4 LY WEST OF CENTER DRAINAGE DITCH 2003R00220 150641.001 99-07016	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	16,608	0	0	16,608	
	2024	0	17,710	0	0	17,710	

15-11-26-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --
Signed: _____ Date ____ / ____ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-200-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKINNER DAVID D

Address to send notice if different than shown at left:

909 TRAMORE PL
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,538** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-26-200-003-00	Class 0021	Acreage 15.000	Print Date 9/23/2024	2023 Taxes: \$ 624.16		ESTIMATED	2024 Taxes: \$ 666.00
Legal Description THAT PART LY E OF CEN LN OF DR DITCH NE1/4 2003R00632 150640.001 95-04626 90-01244	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	9,876	0	0	9,876	
	2024	0	10,538	0	0	10,538	

15-11-26-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

FRISINA RE FY TRUST
%CYNTHIA FRISINA

9645 NESBIT LAKES DR
ALPHARETTA GA 30022

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$49,858 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

15-11-26-300-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-300-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

FRISINA JAMES JR

Address to send notice if different than shown at left:

PO BOX 732
TAYLORVILLE

IL 62568

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$50,004 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-26-300-001-01

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DDS FARMS INC
% DAVID SKINNER

909 TRAMORE PL
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,689** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-26-400-001-00	Class 0021	Acreage 49.000	Print Date 9/23/2024	2023 Taxes: \$ 1,803.08		ESTIMATED	2024 Taxes: \$ 1,939.53
Legal Description THAT PART W1/2 SE1/4 LY W OF CENTER LINE DRAINAGE DITCH 150641.000 2003R00220	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	28,530	0	0	28,530	
	2024	0	30,689	0	0	30,689	

15-11-26-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-400-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKINNER DAVID D

Address to send notice if different than shown at left:

909 TRAMORE PL
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,142** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-26-400-002-00	Class 0021	Acreage 45.000	Print Date 9/23/2024	2023 Taxes: \$ 1,525.32		ESTIMATED	2024 Taxes: \$ 1,652.16
Legal Description THAT PART SE1/4 LY E OF DD EX 1.00AC TR & EX E65AC 2003R00632 150642.000 95-04626 90-01244	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	24,135	0	0	24,135	
	2024	0	26,142	0	0	26,142	

15-11-26-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-400-002-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKINNER DAVID D

Address to send notice if different than shown at left:

909 TRAMORE PL
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,518** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-26-400-002-01	Class 0021	Acreage 25.000	Print Date 9/23/2024	2023 Taxes: \$ 907.30		ESTIMATED		2024 Taxes: \$ 980.73
Legal Description E25.00AC E1/2 SE1/4 150643.000 91-00886 90-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	14,356	0	0	14,356		
	2024	0	15,518	0	0	15,518		

15-11-26-400-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1990	\$58,750		Yes
04/12/2005	\$115,000	2005R02053	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-400-002-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKINNER DAVID D

Address to send notice if different than shown at left:

909 TRAMORE PL
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,067** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-26-400-002-02	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,466.62		ESTIMATED		2024 Taxes: \$ 1,584.22
Legal Description W40.00AC E65.00AC E1/2 SE1/4 150640.000 90-01243		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	23,206	0	0	23,206	
		2024	0	25,067	0	0	25,067	

15-11-26-400-002-02

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1990	\$94,000		Yes
04/10/2007	\$200,000	2007R01721	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-400-005-00 171 E 1300 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WILLIAMS MERLE L II

Address to send notice if different than shown at left:

171 E 1300 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,113** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-26-400-005-00	Class 0010	Acreage 1.000	Print Date 9/23/2024	2023 Taxes: \$ 1,751.02		ESTIMATED		2024 Taxes: \$ 1,776.73
Legal Description S160 W272.25 SE1/4 SE1/4 150642.001 91-02953	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,138	0	26,568	0	33,706		
	2024	7,033	0	27,080	0	34,113		

Land Fair Cash Val: 21,099 Building Fair Cash Val: 81,240 **Non-Farm Value: 102,339**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1991	\$36,000		Yes
12/23/2010	\$35,000	2010R06118	Yes
02/03/2015	\$87,500	2015R00414	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-26-400-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-26-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$10 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-26-700-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-27-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LAMB GLORIA C TR

Address to send notice if different than shown at left:

6 TURNBERRY PL
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$131,121** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-27-100-001-00	Class 0011	Acreage 159.520	Print Date 9/23/2024	2023 Taxes: \$ 8,141.56		ESTIMATED	2024 Taxes: \$ 8,624.26
Legal Description NW1/4 150649.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	105,782	0	18,000	123,782	
	2024	0	113,121	0	18,000	131,121	

15-11-27-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-27-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

WRIGHT LARRY J & WILMA E TRUSTEES

Address to send notice if different than shown at left:

75 E 1300 NORTH RD
PAWNEE

IL 62558

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$30,256 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-27-200-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-27-200-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WRIGHT LARRY J & WILMA E TRUSTEES

Address to send notice if different than shown at left:

75 E 1300 NORTH RD
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,440** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-27-200-001-01	Class 0021	Acreage 40.170	Print Date 9/23/2024	2023 Taxes: \$ 1,833.34		ESTIMATED	2024 Taxes: \$ 1,804.82
Legal Description S1/2 W1/2 NE1/4 2005R00193	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	25,441	0	0	25,441	
	2024	0	27,440	0	0	27,440	

15-11-27-200-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-27-200-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIRSCHFELD MARY TRUSTEE

Address to send notice if different than shown at left:

2516 PEMBROOK PT
CHAMPAIGN IL 61821

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$50,444** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-27-200-002-00	Class 0021	Acreage 80.340	Print Date 9/23/2024	2023 Taxes: \$ 3,377.34		ESTIMATED	2024 Taxes: \$ 3,317.87
Legal Description E1/2 NE1/4 150646.000 97-06164	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	46,483	0	0	46,483	
	2024	0	50,444	0	0	50,444	

15-11-27-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-27-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON VICKI S TRUST

Address to send notice if different than shown at left:

3105 IRONOAK CIR
 SPRINGFIELD IL 62711

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$58,210** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-27-300-001-00	Class 0021	Acreage 79.960	Print Date 9/23/2024	2023 Taxes: \$ 3,587.74		ESTIMATED	2024 Taxes: \$ 3,828.66
Legal Description W1/2 SW1/4 2003R10034 QCD 150650.000 2003R10032 1995R06131 1996R02044 1996R01438	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	54,547	0	0	54,547	
	2024	0	58,210	0	0	58,210	

15-11-27-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1996	\$259,870		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-27-300-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WRIGHT LARRY J & WILMA E TRUSTEES

Address to send notice if different than shown at left:

75 E 1300 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$56,342** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-27-300-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,461.20		ESTIMATED		2024 Taxes: \$ 3,705.80
Legal Description E1/2 SW1/4 150651.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	52,623	0	0	52,623		
	2024	0	56,342	0	0	56,342		

15-11-27-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-27-400-001-00 75 E 1300 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WRIGHT LARRY J & WILMA E TRUSTEES

Address to send notice if different than shown at left:

75 E 1300 NORTH RD
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160,480** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-27-400-001-00	Class 0011	Acreage 159.000	Print Date 9/23/2024	2023 Taxes: \$ 9,648.52		ESTIMATED	2024 Taxes: \$ 9,831.79	
Legal Description SE1/4 EX S418.85' E208' 150651.000 87-21447	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,070	92,211	43,939	12,000	152,220		
	2024	4,010	99,827	44,643	12,000	160,480		

15-11-27-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/15/2018	\$60,000	2018R02664	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-27-400-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOARMAN BROTHERS LLC

Address to send notice if different than shown at left:

5815 BOARMAN RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,720** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-27-400-001-01	Class 0011	Acreage 2.000	Print Date 9/23/2024	2023 Taxes: \$ 2,171.18	ESTIMATED			2024 Taxes: \$ 2,546.74
Legal Description E208' S418.85' SE1/4 150651.000 87-21447	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,711	437	19,012	10,850	33,010		
	2024	6,050	290	23,380	9,000	38,720		

15-11-27-400-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/15/2018	\$60,000	2018R02664	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-27-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-27-700-001-00	Class 7100	Acreage 640.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING ALL SEC ALL MINED OUT 157761.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-11-27-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WEBSTER FAMILY LTD PARTNERSHIP
%JASON L WEBSTER

35167 E 5TH RD
VIRDEN IL 62690

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$43,782** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-34-100-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 2,655.66		ESTIMATED	2024 Taxes: \$ 2,879.69
Legal Description W1/2 NW1/4 1997R02694 150657.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	40,376	0	0	40,376	
	2024	0	43,782	0	0	43,782	

15-11-34-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-100-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DDS FARMS INC

909 TRAMORE PL
PAWNEE

IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$57,171** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-34-100-001-01	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,515.58		ESTIMATED	2024 Taxes: \$ 3,760.33
Legal Description E1/2 NW1/4	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	53,450	0	0	53,450	
	2024	0	57,171	0	0	57,171	

15-11-34-100-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
10/14/2005	\$392,000	2005R05868	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DDS FARMS INC

909 TRAMORE PL
PAWNEE

IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,825** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-34-200-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,860.04		ESTIMATED	2024 Taxes: \$ 1,830.14
Legal Description W1/2 W1/2 NE1/4 2002-08507 150656.000 2002-03197	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	25,847	0	0	25,847	
	2024	0	27,825	0	0	27,825	

15-11-34-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2002	\$256,000		Yes
12/05/2018	\$475,000	2018R04021	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-200-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKINNER DAVID D & SONJA

Address to send notice if different than shown at left:

909 TRAMORE PL
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,776** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-34-200-001-01	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,593.80		ESTIMATED	2024 Taxes: \$ 1,563.83
Legal Description E1/2 W1/2 NE1/4 2002-08506 2002R08506	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	21,799	0	0	21,799	
	2024	0	23,776	0	0	23,776	

15-11-34-200-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/05/2018	\$475,000	2018R04019	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-200-002-00 1261 N 100 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCHIEN CINDA S (LSR)
FOR TERRY HIGGASON (LSE)

14 N COTTON HILL LN
SPRINGFIELD IL 62712

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$54,460** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-34-200-002-00	Class 0011	Acreage 58.490	Print Date 9/23/2024	2023 Taxes: \$ 3,166.38		ESTIMATED	2024 Taxes: \$ 3,187.37	
Legal Description E 1/2 NE 1/4 EX E 200 N 1/2 SE 1/4 SE 1/4 NE 1/4 & EX N 1/2 NE 1/4 NE 1/4 MHRE 2001-03514 150655.000 96-03338	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,372	36,054	7,157	0	50,583		
	2024	7,267	38,860	8,333	0	54,460		

15-11-34-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000
2024	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1996	\$192,984		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-200-002-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SCHIEN CINDA S

Address to send notice if different than shown at left:

14 N COTTON HILL LN
SPRINGFIELD IL 62712

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$12,017 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-11-34-200-002-01

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Exemption History Amount Tax Year

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 06/01/1996, \$66,000, Yes)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-200-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCHIEN CINDA &
CINDA S SCHIEN TRUSTEE

14 N COTTON HILL LN
SPRINGFIELD IL 62712

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,838** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-34-200-003-00	Class 0083	Acreage 1.510	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 120.89
Legal Description E200 N1/2 SE1/4 SE1/4 NE1/4 150655.001 79-27034	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	11	0	0	0	11	
	2024	1,838	0	0	0	1,838	

Land Fair Cash Val: 5,514 Building Fair Cash Val: 0 **Non-Farm Value: 5,514**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1979	\$13,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-34-200-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WEBER PHILLIP DEAN & JANET ANNE CO TRI
 406 NELSON ST
 PO BOX 812
 PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,543** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-34-300-001-00	Class 0021	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 704.10		ESTIMATED	2024 Taxes: \$ 759.22
Legal Description N1/2 NW1/4 SW1/4 150660.000 1997R04018	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	10,705	0	0	10,705	
	2024	0	11,543	0	0	11,543	

15-11-34-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --
 Signed: _____ Date ____ / ____ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-300-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WEBER JAMES R & DONNA P

Address to send notice if different than shown at left:

540 IRIS LN
KIRKWOOD MO 63122

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,257** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-34-300-001-01	Class 0021	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 685.24		ESTIMATED	2024 Taxes: \$ 740.41
Legal Description S1/2 NW1/4 SW1/4 98-04017	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	10,418	0	0	10,418	
	2024	0	11,257	0	0	11,257	

15-11-34-300-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-300-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

KROENING PATRICIA
% US BANK FARM MANAGEMENT

205 S 5TH ST
SPRINGFIELD IL 62701

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$18,259 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed breakdown table for 2023 and 2024 valuations by category (HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL).

15-11-34-300-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-300-003-00 1206 N 000 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DDS FARMS INC

Address to send notice if different than shown at left:

909 TRAMORE PL
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$168,200** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-34-300-003-00	Class 0010	Acreage 6.490	Print Date 9/23/2024	2023 Taxes: \$ 11,183.50		ESTIMATED 2024 Taxes: \$ 11,063.07	
Legal Description 6.49AC IN SW COR SW1/4 SW1/4 2000-04980 150658.003 2000-04981 77-15528	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	16,764	0	153,267	0	170,031	
	2024	16,520	0	151,680	0	168,200	

Land Fair Cash Val: 49,560 Building Fair Cash Val: 455,040 **Non-Farm Value: 504,600**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/26/2006	\$275,000	2006R03099	No
07/17/2020	\$320,000	2020R02600	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-34-300-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-300-003-01 1210 N 000 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RUSH MILISA ANN

Address to send notice if different than shown at left:

1210 N 000 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$67,277** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-34-300-003-01	Class 0010	Acreage 1.510	Print Date 9/23/2024	2023 Taxes: \$ 2,349.50		ESTIMATED	2024 Taxes: \$ 2,386.06	
Legal Description BEG SW COR SW1/4 N471.60 N138 E295.20 S147.60 E364.80 S50 W468.19 N52.81 W192 TO BEG 2001-07705	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	8,228	0	58,493	0	66,721		
	2024	8,110	0	59,167	0	67,277		

Land Fair Cash Val: 24,330 Building Fair Cash Val: 177,501 **Non-Farm Value: 201,831**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	IMPROVEMENT	449
	IMPROVEMENT	24551
2024	OWNER OCCUPD	6000
	IMPROVEMENT	25000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-34-300-003-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-300-004-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BOURNE RODNEY E & KIMBERLY L

Address to send notice if different than shown at left:

35243 BLACK DIAMOND TRL
PAWNEE IL 62558

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$26,187 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-34-300-004-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Rows for 04/12/2005 sales)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-300-004-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BOURNE RODNEY E & KIMBERLY L

Address to send notice if different than shown at left:

35243 BLACK DIAMOND TRL
PAWNEE IL 62558

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$33,326 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for legal description with columns for Year, Homesite/Lots, Farm Land, Buildings, Farm Bldgs, and Total.

15-11-34-300-004-01

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCHIEN CINDA S

Address to send notice if different than shown at left:

14 N COTTON HILL LN
 SPRINGFIELD IL 62712

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$59,006** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-34-400-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,941.82		ESTIMATED		2024 Taxes: \$ 3,881.02
Legal Description N1/2 SE1/4 97-05773 150662.000 76-5441	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	55,065	0	0	55,065		
	2024	0	59,006	0	0	59,006		

15-11-34-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-400-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOEKER DAVID L

Address to send notice if different than shown at left:

21 BLACKBERRY LN
MORTON IL 61550

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,618** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-34-400-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,563.10		ESTIMATED		2024 Taxes: \$ 1,684.98
Legal Description SW1/4 SE1/4 150663.001 2004R03240		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	23,765	0	0	23,765	
		2024	0	25,618	0	0	25,618	

15-11-34-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/23/2021	\$849,474	2021R03073	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-400-003-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DDS FARMS INC
% DAVID SKINNER

909 TRAMORE PL
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,356** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-34-400-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,417.16	ESTIMATED	2024 Taxes: \$ 1,536.20
Legal Description SE1/4 SE1/4 150663.000 98-03091	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL
	2023	0	21,546	0	0	21,546
	2024	0	23,356	0	0	23,356

15-11-34-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1998	\$150,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-34-700-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DDS FARMS INC
% DAVID SKINNER

909 TRAMORE PL
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,825** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-34-700-001-00	Class 7100	Acreage 640.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 777.77
Legal Description COAL & MINERAL RIGHTS UNDERLY ALL SECTION EXCEPT 167 ACRES 157762.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	11,825	0	11,825	

15-11-34-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-35-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKINNER DONALD L TRUSTEE
%DAVID SKINNER

909 TRAMORE PL
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,178** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-35-100-001-00	Class 0021	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 881.84		ESTIMATED	2024 Taxes: \$ 866.76
Legal Description N1/2 SW1/4 NW1/4 150666.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	12,191	0	0	12,191	
	2024	0	13,178	0	0	13,178	

15-11-35-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/14/2012	\$250,000	2012R06284	No
12/04/2018	\$120,000	2018R04011	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-35-100-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

FRISINA JAMES JR

Address to send notice if different than shown at left:

PO BOX 732
TAYLORVILLE

IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$11,870 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-11-35-100-001-01

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four tick marks for valuation input.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-35-100-001-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FRISINA RE FY TRUST
%CYNTHIA FRISINA

9645 NESBIT LAKES DR
ALPHARETTA GA 30022

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,686** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-35-100-001-02	Class 0021	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 784.10		ESTIMATED	2024 Taxes: \$ 768.63
Legal Description E1/2 NW1/4 NW1/4	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	10,705	0	0	10,705	
	2024	0	11,686	0	0	11,686	

15-11-35-100-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-35-100-001-03

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKINNER JUSTIN & LOGAN D & MIA R
%DAVID SKINNER

909 TRAMORE PL
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,910** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-35-100-001-03	Class 0021	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 995.70		ESTIMATED 2024 Taxes: \$ 980.68	
Legal Description S1/2 SW1/4 NW1/4	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	13,922	0	0	13,922	
	2024	0	14,910	0	0	14,910	

15-11-35-100-001-03

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/14/2012	\$250,000	2012R06282	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-35-100-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SPENGLER CARL E & MARILYN D TRUSTEES

Address to send notice if different than shown at left:

1197 N 100 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,680** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-35-100-002-00	Class 0021	Acreage 78.660	Print Date 9/23/2024	2023 Taxes: \$ 3,376.46		ESTIMATED		2024 Taxes: \$ 3,464.94
Legal Description E1/2 NW1/4 EX E163 N412.10 150667.000 86-12428		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	48,902	0	0	48,902	
		2024	0	52,680	0	0	52,680	

15-11-35-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/19/2016	\$1,185,800	2016R01799	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-35-100-002-01 148 E 1300 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PUCKETT JEFFREY A & DEANA M

148 E 1300 RD N
PO BOX 195
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$50,684** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-35-100-002-01	Class 0010	Acreage 1.750	Print Date 9/23/2024	2023 Taxes: \$ 3,165.80		ESTIMATED		2024 Taxes: \$ 3,333.65
Legal Description E163 N412.10 NE1/4 NW1/4 & W22 N412.10 NW1/4 NE1/4 150667.001 2004R06835 185X412.10 92-03773 2002-03837	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	8,745	0	39,387	0	48,132		
	2024	8,617	0	42,067	0	50,684		

Land Fair Cash Val: 25,851 Building Fair Cash Val: 126,201 **Non-Farm Value: 152,052**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2004	\$114,900		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-35-100-002-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-35-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SPENGLER CARL E & MARILYN D TRUSTEE

Address to send notice if different than shown at left:

1197 N 100 EAST RD
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,906** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-35-200-001-00	Class 0021	Acreage 19.800	Print Date 9/23/2024	2023 Taxes: \$ 788.70		ESTIMATED		2024 Taxes: \$ 848.87
Legal Description W1/2 NW1/4 NE1/4 EX W22 N412.10 150665.000 86-12428	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	11,991	0	0	11,991		
	2024	0	12,906	0	0	12,906		

15-11-35-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/19/2016	\$1,185,800	2016R01799	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-35-200-002-00 1293 N 200 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLANTON JOHN M & DEBRA

Address to send notice if different than shown at left:

1293 N 200 EAST RD
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$79,595** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-35-200-002-00	Class 0011	Acreage 2.131	Print Date 9/23/2024	2023 Taxes: \$ 4,841.38	ESTIMATED			2024 Taxes: \$ 4,840.59
Legal Description BEG NE COR NE1/4 NE1/4 S289' TO POB THENCE S396.85' W170' N147.85' W100 N249 E270' TO POB 2004R07026 150664.000 2007R02800	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,993	175	57,439	15,000	79,607		
	2024	6,893	185	57,517	15,000	79,595		

15-11-35-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/2004	\$200,000	2004R07026	No
05/02/2005	\$180,000	2005R02484	No
04/26/2007	\$180,000	2007R02040	No
05/08/2007	\$189,900	2007R02270	No
11/19/2018	\$198,000	2018R03829	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-35-200-002-01 150 E 1250 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKINNER DONALD L TR
% DAVID SKINNER

909 TRAMORE PL
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,453** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-35-200-002-01	Class 0021	Acreage 50.220	Print Date 9/23/2024	2023 Taxes: \$ 1,787.32		ESTIMATED		2024 Taxes: \$ 1,937.22
Legal Description NE1/4 LY W OF MIDDLE OF CLEAR CREEK EX W1/2 NW1/4 NE1/4 2003R00633 2002-03683 2003R05026	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	27,174	0	0	27,174		
	2024	0	29,453	0	0	29,453		

15-11-35-200-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2002	\$170,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-35-200-002-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SKINNER DONALD L TR
% DAVID SKINNER

909 TRAMORE PL
PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$54,536 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-35-200-002-02

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?.

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-35-200-002-03 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOARMAN THOMAS L
ATTN: MICHAEL BOARMAN

403 CARROLL ST
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,048** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-35-200-002-03	Class 0011	Acreage 0.340	Print Date 9/23/2024	2023 Taxes: \$ 529.16		ESTIMATED	2024 Taxes: \$ 529.34
Legal Description BEG NE COR NE1/4 NE1/4 S538, TH W170 TO POB W100, S147.85, E100, N147.85 TO POB PARCEL CAN ONLY BE SOLD TO ADJOINING LAND OWNER	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	45	0	8,000	8,045	
	2024	0	48	0	8,000	8,048	

15-11-35-200-002-03

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-35-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCHIEN CINDA S

Address to send notice if different than shown at left:

14 N COTTON HILL LN
 SPRINGFIELD IL 62712

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,967** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-35-300-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,468.16		ESTIMATED		2024 Taxes: \$ 3,483.81
Legal Description W1/2 SW1/4 97-05773 150668.000 76-5441	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	49,080	0	0	49,080		
	2024	0	52,967	0	0	52,967		

15-11-35-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-35-300-002-00 139 E 1200 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKINNER FARMS INC
% KIMBERLY BOURNE

35243 BLACK DIAMOND TRL
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$157,880** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-35-300-002-00	Class 0011	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 10,031.02		ESTIMATED		2024 Taxes: \$ 10,384.29
Legal Description E1/2 SW1/4 150670.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,639	51,220	27,650	68,000	152,509		
	2024	5,557	54,843	29,480	68,000	157,880		

15-11-35-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-35-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKINNER LYNDA E & JUSTIN

Address to send notice if different than shown at left:

28 BRENDA DR
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$65,170** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-35-400-001-00	Class 0021	Acreage 100.000	Print Date 9/23/2024	2023 Taxes: \$ 3,985.94		ESTIMATED	2024 Taxes: \$ 4,286.45
Legal Description THAT PART SE1/4 LY W OF DD 82-44260 150669.001 95-03571&2 83-47002 87-18944	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	60,601	0	0	60,601	
	2024	0	65,170	0	0	65,170	

15-11-35-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-35-400-002-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKINNER LYNDA E

Address to send notice if different than shown at left:

28 BRENDA DR
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$37,030** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-35-400-002-00	Class 0021	Acreage 60.000	Print Date 9/23/2024	2023 Taxes: \$ 2,259.26		ESTIMATED		2024 Taxes: \$ 2,435.59
Legal Description THAT PART SE1/4 LY E OF DD 150669.000 95-03575	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	34,349	0	0	34,349		
	2024	0	37,030	0	0	37,030		

15-11-35-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-36-100-001-00 MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

ORLANDINI TRUST 71212
%DOMINIC G ORLANDINI

9320 FREEDOM WAY NE
ALBUQUERQUE NM 87109

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$21,382 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-11-36-100-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 08/19/2011, \$303,465, 2011R03642, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-36-100-001-01 MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BOARMAN MICHAEL E & SHEILA E TR

Address to send notice if different than shown at left:

4515 BIRMINGHAM DR
PAWNEE IL 62558

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$14,314 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-36-100-001-01

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 08/18/2011, \$202,310, 2011R03610, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-36-100-001-02 MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BOARMAN BROTHERS LAND HOLDING LLC
%MICHAEL E BOARMAN

5815 BOARMAN RD
PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$5,971 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-11-36-100-001-02

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow pointing up)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 08/18/2011, \$101,155, 2011R03611, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-36-100-001-03 MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH WILLIAM J & NATALIE M

Address to send notice if different than shown at left:

201 HICKORY CT
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,983** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-36-100-001-03	Class 0021	Acreage 10.000	Print Date 9/23/2024	2023 Taxes: \$ 349.00		ESTIMATED		2024 Taxes: \$ 378.12
Legal Description BE NE COR N1/2 NW1/4 W327.48' TO POB S1332.14' W327.66' N1330.58' E327.48' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	5,522	0	0	5,522		
	2024	0	5,983	0	0	5,983		

15-11-36-100-001-03

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/18/2011	\$101,175	2011R03612	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-36-100-001-04 MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ORLANDINI DOMINIC G & CAROL L AS TRUST

Address to send notice if different than shown at left:

9320 FREEDOM WAY NE
ALBUQUERQUE NM 87109

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,234** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-36-100-001-04	Class 0021	Acreage 10.030	Print Date 9/23/2024	2023 Taxes: \$ 364.72		ESTIMATED	2024 Taxes: \$ 393.99
Legal Description BEG NE COR N1/2 NW1/4 S1333.70' W327.66' N1332.14' E327.48' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	5,771	0	0	5,771	
	2024	0	6,234	0	0	6,234	

15-11-36-100-001-04

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/18/2011	\$101,175	2011R03613	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-36-100-002-00 MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC
%JOSEPH A BLOOME

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$53,483** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-36-100-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,151.18		ESTIMATED	2024 Taxes: \$ 3,380.10
Legal Description S1/2 NW1/4 150676.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	49,460	0	0	49,460	
	2024	0	53,483	0	0	53,483	

15-11-36-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/29/2017	\$963,636	2017R04625	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-36-200-001-00 MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$80,111** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-36-200-001-00	Class 0021	Acreage 120.000	Print Date 9/23/2024	2023 Taxes: \$ 4,862.14		ESTIMATED	2024 Taxes: \$ 5,062.98
Legal Description NE1/4 NE1/4 & W1/2 NE1/4 2002-01356 2002-01355 150672.000 2002-01365 88-5992	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	74,429	0	0	74,429	
	2024	0	80,111	0	0	80,111	

15-11-36-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/01/2001	\$416,897		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-36-200-002-00 MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC
% JOSEPH A BLOOME

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,819** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-36-200-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,374.16		ESTIMATED	2024 Taxes: \$ 1,442.15
Legal Description SE1/4 NE1/4 150673.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	20,975	0	0	20,975	
	2024	0	22,819	0	0	22,819	

15-11-36-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/29/2017	\$481,818	2017R04627	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-36-300-001-00 MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC

Address to send notice if different than shown at left:

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$50,374** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-36-300-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,039.46		ESTIMATED	2024 Taxes: \$ 3,183.62
Legal Description N1/2 SW1/4 150677.000 84-879	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	46,557	0	0	46,557	
	2024	0	50,374	0	0	50,374	

15-11-36-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-36-300-002-00 MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ABSHIRE CAROLYN D CO TRUSTEE

Address to send notice if different than shown at left:

319 E 1400 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$46,000** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-36-300-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 2,769.92		ESTIMATED	2024 Taxes: \$ 2,907.18
Legal Description S1/2 SW1/4 150678.000 74-11324	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	42,292	0	0	42,292	
	2024	0	46,000	0	0	46,000	

15-11-36-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-36-400-001-00 MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SEIZ DENNIS L

Address to send notice if different than shown at left:

15400 S PAWNEE RD
PAWNEE IL 62558

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$23,453 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-11-36-400-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four tick marks for valuation input.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 01/02/2007, \$93,064, 2007R00010, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-36-400-002-00 MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC
% JOSEPH A BLOOME

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$47,986** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-36-400-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,284.32		ESTIMATED	2024 Taxes: \$ 3,455.48
Legal Description E1/2 SE1/4 150681.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	44,217	0	0	44,217	
	2024	0	47,986	0	0	47,986	

15-11-36-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/29/2017	\$963,636	2017R04626	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-36-400-003-00 288 E 1200 NORTH RD MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ABSHIRE JOHN H & BETH E

Address to send notice if different than shown at left:

288 E 1200 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$67,546** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-36-400-003-00	Class 0010	Acreage 2.000	Print Date 9/23/2024	2023 Taxes: \$ 3,107.14		ESTIMATED		2024 Taxes: \$ 4,431.93
Legal Description BEG SE COR SW1/4 SE1/4 W591.65' POB W177.5' N420' E177.5' S420' TO BEG 150680.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,278	0	39,842	0	49,120		
	2024	9,143	0	58,403	0	67,546		

Land Fair Cash Val: 27,429 Building Fair Cash Val: 175,209 **Non-Farm Value: 202,638**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/23/2006	\$20,000	2006R03091	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-11-36-400-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-36-400-003-01 226 E 1200 NORTH RD MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SULWER JILLIAN &
KEVIN MONTROY

226 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$72,727** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change: PROPERTY CHANGED FROM FARM TO NON-FARM CLASSIFICATION

Parcel Number 15-11-36-400-003-01	Class 0011	Acreage 5.010	Print Date 9/23/2024	2023 Taxes: \$ 5,726.74	ESTIMATED			2024 Taxes: \$ 4,805.02
Legal Description S420 W520 SW1/4 SE1/4 150680.002 2000-04982 89-9199	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	15,308	0	70,117	0	85,425		
	2024	7,710	517	52,000	12,500	72,727		

15-11-36-400-003-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/29/2014	\$200,000	2014R03959	No
06/02/2023	\$225,000	2023R01477	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-36-400-003-02 MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SEIZ DENNIS L & JANNA

Address to send notice if different than shown at left:

15400 S PAWNEE RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,970** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-11-36-400-003-02	Class 0021	Acreage 33.000	Print Date 9/23/2024	2023 Taxes: \$ 1,437.72		ESTIMATED	2024 Taxes: \$ 1,510.05
Legal Description BEG SW COR SE1/4 N420 POB N900.37 E1319.96 S1321.50 W591.65 N420 TO THE BEG 2003R10040	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	19,394	0	0	19,394	
	2024	0	20,970	0	0	20,970	

15-11-36-400-003-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/2003	\$115,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-11-36-700-001-00 MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-11-36-700-001-00	Class 7100	Acreage 600.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MIN RTS UNDERLYING ALL SEC 36 EX SW1/4 NE1/4 157764.000 90-01918	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-11-36-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-03-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DALY LARRY B & JOHN R

Address to send notice if different than shown at left:

1427 N 1025 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$41,756** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-03-100-001-00	Class 0021	Acreage 75.170	Print Date 9/23/2024	2023 Taxes: \$ 2,406.50		ESTIMATED	2024 Taxes: \$ 2,578.00
Legal Description W1/2 NW1/4 EX 1.00AC SW COR 150002.000 93-7995 93-7994 89-11496	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	38,978	0	0	38,978	
	2024	0	41,756	0	0	41,756	

15-12-03-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-03-100-002-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DALY LARRY B & JOHN R

Address to send notice if different than shown at left:

1427 N 1025 EAST RD
TAYLORVILLE IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$696 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-03-100-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 08/01/1989, \$1,500, Yes)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes handwritten initials Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-03-100-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DALY JAMES E REVOCABLE TRUST

Address to send notice if different than shown at left:

1347 N 1025 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,813** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-03-100-003-00	Class 0021	Acreage 73.170	Print Date 9/23/2024	2023 Taxes: \$ 1,627.52		ESTIMATED		2024 Taxes: \$ 1,778.90
Legal Description E1/2 NW1/4 LYING W OF RIVER EX 2.83AC NE COR 1998R07779 150004.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	26,361	0	0	26,361		
	2024	0	28,813	0	0	28,813		

15-12-03-100-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1987	\$55,750		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-03-100-004-00 660 E 1800 NORTH RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MULVANEY WILLIAM R & BARBARA J

Address to send notice if different than shown at left:

660 E 1800 NORTH RD
EDINBURG IL 62531

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$63,560 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: PARTIAL ASSESSMENT FOR NEW BUILDING

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 47,181 Building Fair Cash Val: 143,499 Non-Farm Value: 190,680

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year 2023, Tax Year 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Table with columns: Date Sold, Sale Price, Doc#, Qualified? (Sales History)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-03-100-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-03-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LIEBER DAVID & DEBBIE

Address to send notice if different than shown at left:

12 W FAIRVIEW LN
SPRINGFIELD IL 62711

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$60,768** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-03-200-001-00	Class 0021	Acreage 139.680	Print Date 9/23/2024	2023 Taxes: \$ 3,458.42		ESTIMATED		2024 Taxes: \$ 3,751.79
Legal Description NE1/4 LY E OF SANGAMON RIVER & E1/2 NW1/4 LY E OF SANGAMON RIVER 1998R07779 150003.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	56,016	0	0	56,016		
	2024	0	60,768	0	0	60,768		

15-12-03-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
11/23/2021	\$600,000	2021R04965	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-03-200-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DALY JAMES E REVOCALBE TRUST

Address to send notice if different than shown at left:

1347 N 1025 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,266** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-03-200-001-01	Class 0021	Acreage 16.360	Print Date 9/23/2024	2023 Taxes: \$ 243.88		ESTIMATED	2024 Taxes: \$ 263.38
Legal Description NE 1/4 LY W OF SANGAMON RIVER 1998R07777	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	3,950	0	0	3,950	
	2024	0	4,266	0	0	4,266	

15-12-03-200-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-03-300-001-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DALY JAMES E REVOCABLE TRUST

Address to send notice if different than shown at left:

1347 N 1025 EAST RD
TAYLORVILLE IL 62568

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$33,606 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed breakdown table for 2023 and 2024 valuations by category (HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL).

15-12-03-300-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-03-300-001-01 1738 N 600 EAST RD EDINBURG

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DALY LAWRENCE B

Address to send notice if different than shown at left:

1427 N 1025 EAST RD
TAYLORVILLE IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$41,811 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-03-300-001-01

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-03-300-003-00 1724 N 600 EAST RD EDINBURG

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PUCETTI DAVID & KIMBERLY A (LSR)
FOR MATTHEW PUCETTI (LSE)

932 E 1500 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$45,452** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-03-300-003-00	Class 0011	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 2,455.42		ESTIMATED	2024 Taxes: \$ 2,910.97
Legal Description S1/2 NW1/4 SW1/4 2002R02309 1999R07060 BK340 PG641 150010.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,997	7,181	26,100	1,000	39,278	
	2024	4,923	7,832	30,697	2,000	45,452	

15-12-03-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000
<u>Tax Year</u> 2024 Leasehold Owner	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/14/2007	\$126,500	2007R05554	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-03-300-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARAS FARM TRUST

650 RIDGE ST
PO BOX 416
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,352** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-03-300-004-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,674.70		ESTIMATED	2024 Taxes: \$ 1,796.82
Legal Description SW1/4 SW1/4 150007.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	22,697	0	0	22,697	
	2024	0	24,352	0	0	24,352	

15-12-03-300-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-03-300-005-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DALY JAMES E REVOCABLE TRUST

Address to send notice if different than shown at left:

1347 N 1025 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,405** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-03-300-005-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,665.04		ESTIMATED	2024 Taxes: \$ 1,800.73
Legal Description SE1/4 SW1/4 150008.001 1994R3086&7 1986R15042	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	22,566	0	0	22,566	
	2024	0	24,405	0	0	24,405	

15-12-03-300-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-03-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DALY JAMES E REVOCABLE TRUST

Address to send notice if different than shown at left:

1347 N 1025 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$68,597** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-03-400-001-00	Class 0021	Acreage 132.060	Print Date 9/23/2024	2023 Taxes: \$ 4,671.78		ESTIMATED	2024 Taxes: \$ 5,061.44
Legal Description SE1/4 LY W OF SANGAMON RIVER 98-07777 150013.000 94-03086 94-03087 86-15042	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	63,316	0	0	63,316	
	2024	0	68,597	0	0	68,597	

15-12-03-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-03-400-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MISSION RANCH LLC

Address to send notice if different than shown at left:

46 W FAIRVIEW LN
SPRINGFIELD IL 62711

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,518** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-03-400-002-00	Class 0021	Acreage 24.730	Print Date 9/23/2024	2023 Taxes: \$ 442.42		ESTIMATED	2024 Taxes: \$ 480.93
Legal Description SW1/4 SE COR SEC 2 W1317.21' TO POB THENCE W649.03' N1322.72' W651.33' W265.56' NWLY321.52' W114.43' SWLY102.09' SWLY393.81' NWLY108.72' N134.90'	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	5,996	0	0	5,996	
	2024	0	6,518	0	0	6,518	

15-12-03-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/04/2020	\$305,856	2020R04860	No
09/24/2021	\$11,220	2021R04090	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-03-400-002-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUSCHON BO A &
EMILY R WILLIAMS

707 E 1700 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$754** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-03-400-002-01	Class 0021	Acreage 7.480	Print Date 9/23/2024	2023 Taxes: \$ 51.44		ESTIMATED	2024 Taxes: \$ 55.63
Legal Description SE1/4 SE1/4 BEG SW COR E1334.32' N61.71' TO POB THENCE W98.81' NWLY76.46' NWLY765.95' N96.56' NELY88.32' SELY164.91' NELY120.08' N123.18' NWLY281.30'	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	697	0	0	697	
	2024	0	754	0	0	754	

15-12-03-400-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
09/24/2021	\$11,220	2021R04090	No
09/08/2022	\$290,000	2022R03292	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-03-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-03-700-001-00	Class 7100	Acreage 625.930	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING ALL SEC 625.93A MINED OUT 157704.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-12-03-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-04-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DMJJ FARMS INC

9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$59,752** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-04-100-001-00	Class 0021	Acreage 75.000	Print Date 9/23/2024	2023 Taxes: \$ 3,476.68		ESTIMATED	2024 Taxes: \$ 3,689.06
Legal Description FARM TRACT #13 BEG NW COR NW1/4 E1266.84 S1598.73 E66 S928.85 W1337.02 N2539.26 1998R02109 150021.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	56,312	0	0	56,312	
	2024	0	59,752	0	0	59,752	

15-12-04-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-04-100-001-01

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DMJJ FARMS INC
%DEAN DOWSON
9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$25,184 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-04-100-001-01

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-04-100-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ORLANDINI JAMES FARMS LLC

Address to send notice if different than shown at left:

PO BOX 6055
SPRINGFIELD IL 62708

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$46,575** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-04-100-002-00	Class 0011	Acreage 48.700	Print Date 9/23/2024	2023 Taxes: \$ 3,145.52		ESTIMATED	2024 Taxes: \$ 2,875.52
Legal Description NE 1/4 NW 1/4 & N 10.00 AC SE 1/4 NW 1/4 150014.001 1993R8000 1989R11496	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	32,448	0	18,500	50,948	
	2024	0	34,575	0	12,000	46,575	

15-12-04-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-04-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ORLANDINI JAMES FARMS LLC

Address to send notice if different than shown at left:

PO BOX 6055
SPRINGFIELD IL 62708

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,413** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-04-200-001-00	Class 0021	Acreage 155.780	Print Date 9/23/2024	2023 Taxes: \$ 1,125.20		ESTIMATED	2024 Taxes: \$ 1,198.55
Legal Description NE 1/4 150014.000 1993R08000 1989R11496	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	18,225	0	0	18,225	
	2024	0	19,413	0	0	19,413	

15-12-04-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-04-300-001-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DMJJ FARMS INC
%DEAN DOWSON
9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$48,038 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-12-04-300-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Four vertical lines for inputting assessed valuations.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-04-300-001-01

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SOUTH FORK SANITARY DIST
%ROBERT GUDGEL PRES

PO BOX 62
TOVEY IL 62570

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$0 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-12-04-300-001-01

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-04-300-001-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DMJJ FARMS INC
%DEAN DOWSON
9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$45,983** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-04-300-001-02	Class 0021	Acreage 59.740	Print Date 9/23/2024	2023 Taxes: \$ 3,199.84		ESTIMATED	2024 Taxes: \$ 3,392.86
Legal Description FARM TRACT #12 BEG SE COR SW1/4 W875 TO BEG W746.37 TH ALONG SANCHRIS LAKE PROPERTY 98-02032 2003R02993	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	43,367	0	0	43,367	
	2024	0	45,983	0	0	45,983	

15-12-04-300-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-04-300-001-03

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,588** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-04-300-001-03	Class 0083	Acreage 10.373	Print Date 9/23/2024	2023 Taxes: \$ 686.88		ESTIMATED	2024 Taxes: \$ 707.45
Legal Description SW1/4 SANGCHRIS LAKE 10.373AC FOR SANGCHRIS LAKE 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	9,309	0	0	0	9,309	
	2024	9,588	0	0	0	9,588	

Land Fair Cash Val: 28,764 Building Fair Cash Val: 0 **Non-Farm Value: 28,764**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-04-300-001-03

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-04-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIGGASON MARY L &
CAROL J HIGGASON

764 E 1975 NORTH RD
EDINBURG

IL 62531

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,791** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-04-400-001-00	Class 0021	Acreage 43.500	Print Date 9/23/2024	2023 Taxes: \$ 2,269.20		ESTIMATED	2024 Taxes: \$ 2,419.49
Legal Description N43.50AC W1/2 SE1/4 2003R07878 150025.001 90-02558	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	30,754	0	0	30,754	
	2024	0	32,791	0	0	32,791	

15-12-04-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-04-400-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIGGASON MARY L &
CAROL J HIGGASON

764 E 1975 NORTH RD
EDINBURG

IL 62531

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,202** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-04-400-002-00	Class 0021	Acreage 43.500	Print Date 9/23/2024	2023 Taxes: \$ 1,885.14		ESTIMATED	2024 Taxes: \$ 2,007.11
Legal Description N43.5AC E1/2 SE1/4 2003R07878 150025.000 90-02558	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	25,549	0	0	25,549	
	2024	0	27,202	0	0	27,202	

15-12-04-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-04-400-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARAS IVAN E & LORENE

UNIT 6A
1111 COMMUNITY DR
ROCHESTER IL 62563

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,031** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-04-400-003-00	Class 0021	Acreage 36.500	Print Date 9/23/2024	2023 Taxes: \$ 1,942.04		ESTIMATED	2024 Taxes: \$ 2,068.27
Legal Description S36.5AC W1/2 SE1/4 150026.001 91-05523	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	26,320	0	0	26,320	
	2024	0	28,031	0	0	28,031	

15-12-04-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-04-400-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARAS IVAN E & LORENE

UNIT 6A
1111 COMMUNITY DR
ROCHESTER IL 62563

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,989** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-04-400-004-00	Class 0021	Acreage 36.500	Print Date 9/23/2024	2023 Taxes: \$ 754.38		ESTIMATED	2024 Taxes: \$ 810.83
Legal Description S36.5AC E1/2 SE1/4 150026.000 91-05523 78-21778	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	10,224	0	0	10,224	
	2024	0	10,989	0	0	10,989	

15-12-04-400-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-05-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$106,946** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-05-100-001-00	Class 0021	Acreage 150.420	Print Date 9/23/2024	2023 Taxes: \$ 6,216.32		ESTIMATED	2024 Taxes: \$ 6,602.80
Legal Description FARM TRACTS #7, #8 & #10 NW1/4 EX FOR SANGCHRIS LAKE 98-01982 98-01986 98-01980 150027.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	100,686	0	0	100,686	
	2024	0	106,946	0	0	106,946	

15-12-05-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-05-100-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,000** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-05-100-001-01	Class 0083	Acreage 5.414	Print Date 9/23/2024	2023 Taxes: \$ 299.68		ESTIMATED	2024 Taxes: \$ 308.70
Legal Description W1/2 NE1/4 SANGCHRIS LAKE 5.414AC IS FOR SANGCHRIS LAKE 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,854	0	0	0	4,854	
	2024	5,000	0	0	0	5,000	

Land Fair Cash Val: 15,000 Building Fair Cash Val: 0 **Non-Farm Value: 15,000**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-05-100-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-05-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$64,080** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-05-200-001-00	Class 0083	Acreage 69.356	Print Date 9/23/2024	2023 Taxes: \$ 3,841.02		ESTIMATED		2024 Taxes: \$ 3,956.27
Legal Description NE 1/4 SANGCHRIS LAKE & PART OF SANGCHRIS LAKE IN NE 1/4 NW 1/4 98-01242 150028.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	62,213	0	0	0	62,213		
	2024	64,080	0	0	0	64,080		

Land Fair Cash Val: 192,240 Building Fair Cash Val: 0 **Non-Farm Value: 192,240**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-05-200-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-05-200-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,219** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-05-200-001-01	Class 0021	Acreage 39.980	Print Date 9/23/2024	2023 Taxes: \$ 1,174.60		ESTIMATED	2024 Taxes: \$ 1,248.31
Legal Description FARM TRACTS 7 & 10 W1/2 NE1/4 EX FOR SANGCHRIS LAKE 98-01980 98-01986	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	19,025	0	0	19,025	
	2024	0	20,219	0	0	20,219	

15-12-05-200-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-05-200-001-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DMJJ FARMS INC

9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,827** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-05-200-001-02	Class 0021	Acreage 50.660	Print Date 9/23/2024	2023 Taxes: \$ 1,320.86		ESTIMATED	2024 Taxes: \$ 1,409.33
Legal Description FARM TRACT #13 NE1/4 LY E OF SANGCHRIS LAKE 98-02109	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	21,394	0	0	21,394	
	2024	0	22,827	0	0	22,827	

15-12-05-200-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-05-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

Address to send notice if different than shown at left:

2356 W BOARMAN RD
DIVERNON IL 62530

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$118,474** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-05-300-001-00	Class 0021	Acreage 163.250	Print Date 9/23/2024	2023 Taxes: \$ 8,201.60		ESTIMATED		2024 Taxes: \$ 8,741.63
Legal Description FARM TRACTS 6, 7, 8 & 9 SW1/4 98-01980 98-01982 150029.000 98-01984 98-01978	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	111,155	0	0	111,155		
	2024	0	118,474	0	0	118,474		

15-12-05-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-05-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$49,350** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-05-400-001-00	Class 0083	Acreage 53.417	Print Date 9/23/2024	2023 Taxes: \$ 3,535.28		ESTIMATED	2024 Taxes: \$ 3,641.30
Legal Description SE1/4 SANGCRHIS LAKE 53.417AC IS FOR LAKE 98-01242 150030.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	47,913	0	0	0	47,913	
	2024	49,350	0	0	0	49,350	

Land Fair Cash Val: 148,050 Building Fair Cash Val: 0 **Non-Farm Value: 148,050**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-05-400-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-05-400-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$49,024** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-05-400-001-01	Class 0021	Acreage 90.980	Print Date 9/23/2024	2023 Taxes: \$ 3,357.82		ESTIMATED	2024 Taxes: \$ 3,617.25
Legal Description FARM TRACTS 6 & 7 SE1/4 LY W OF SANGCHRIS LAKE 98-01978 98-01980	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	45,508	0	0	45,508	
	2024	0	49,024	0	0	49,024	

15-12-05-400-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-05-400-001-02

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DMJJ FARMS INC

9750 OLD STATE RTE 66

PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$4,149 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-05-400-001-02

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-06-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAM FAMILY LP

Address to send notice if different than shown at left:

2356 W BOARMAN RD
DIVERNON IL 62530

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$99,663** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-06-100-001-00	Class 0021	Acreage 124.700	Print Date 9/23/2024	2023 Taxes: \$ 5,792.36		ESTIMATED	2024 Taxes: \$ 6,153.15
Legal Description FARM TRACT #36 NW1/4 98-07609 150047.000 98-07610 98-04100 98-02609	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	93,819	0	0	93,819	
	2024	0	99,663	0	0	99,663	

15-12-06-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/26/2012	\$5,170,000	2012R07047	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-06-200-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,195** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-06-200-001-00	Class 0083	Acreage 43.552	Print Date 9/23/2024	2023 Taxes: \$ 2,409.26		ESTIMATED	2024 Taxes: \$ 2,481.62
Legal Description NE 1/4 43.552AC IS FOR SANGCHRIS LAKE 98-01242 150044.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	39,023	0	0	0	39,023	
	2024	40,195	0	0	0	40,195	

Land Fair Cash Val: 120,585 Building Fair Cash Val: 0 **Non-Farm Value: 120,585**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-06-200-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-06-200-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,966** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-06-200-001-01	Class 0021	Acreage 11.520	Print Date 9/23/2024	2023 Taxes: \$ 288.02		ESTIMATED	2024 Taxes: \$ 306.60
Legal Description FARM TRACT #8 PART NE1/4 SE1/4 98-01982	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	4,665	0	0	4,665	
	2024	0	4,966	0	0	4,966	

15-12-06-200-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-06-200-001-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,475** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-06-200-001-02	Class 0021	Acreage 6.010	Print Date 9/23/2024	2023 Taxes: \$ 85.08		ESTIMATED 2024 Taxes: \$ 91.07	
Legal Description FARM TRACT 10 E1/2 NE1/4 LY N&E OF SANGCHRIS LAKE 98-01986	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	1,378	0	0	1,378	
	2024	0	1,475	0	0	1,475	

15-12-06-200-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-06-200-001-03 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAM FAMILY LP

Address to send notice if different than shown at left:

2356 W BOARMAN RD
DIVERNON IL 62530

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$64,566** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-06-200-001-03	Class 0021	Acreage 95.060	Print Date 9/23/2024	2023 Taxes: \$ 3,745.00		ESTIMATED	2024 Taxes: \$ 3,986.28
Legal Description FARM TRACT #36 NE1/4 LY W OF SANGCHRIS LAKE 98-07609 98-07610 98-04100 98-02609	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	60,658	0	0	60,658	
	2024	0	64,566	0	0	64,566	

15-12-06-200-001-03

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/26/2012	\$5,170,000	2012R07047	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-06-300-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-06-300-001-00	Class 9900	Acreage 12.089	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description SW1/4 LY S OF SANGCHRIS LAKE EX FARM TRACT #5 ST DOC# 98-11-10 150048.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-12-06-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-06-300-001-01 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,122** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-06-300-001-01	Class 0021	Acreage 8.140	Print Date 9/23/2024	2023 Taxes: \$ 285.84		ESTIMATED	2024 Taxes: \$ 304.14
Legal Description FARM TRACT #5 PART SE1/4 SW1/4 98-07609 98-01976	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	3,874	0	0	3,874	
	2024	0	4,122	0	0	4,122	

15-12-06-300-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-06-300-001-02 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAM FAMILY LP

Address to send notice if different than shown at left:

2356 W BOARMAN RD
DIVERNON IL 62530

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$46,562** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-06-300-001-02	Class 0021	Acreage 71.570	Print Date 9/23/2024	2023 Taxes: \$ 3,228.26		ESTIMATED	2024 Taxes: \$ 3,435.59
Legal Description FARM TRACT #35 LY N OF SANGCHRIS LAKE SW1/4 & LY W OF SANGCHRIS LAKE SW1/4 SW1/4 98-07610	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	43,752	0	0	43,752	
	2024	0	46,562	0	0	46,562	

15-12-06-300-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/26/2012	\$5,170,000	2012R07047	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-06-300-001-03 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,045** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-06-300-001-03	Class 0083	Acreage 28.201	Print Date 9/23/2024	2023 Taxes: \$ 1,865.74		ESTIMATED	2024 Taxes: \$ 1,921.74
Legal Description SW1/4 28.201AC IS FOR SANGCHRIS LAKE 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	25,286	0	0	0	25,286	
	2024	26,045	0	0	0	26,045	

Land Fair Cash Val: 78,135 Building Fair Cash Val: 0 **Non-Farm Value: 78,135**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-06-300-001-03

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-06-400-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,075** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-06-400-001-00	Class 0083	Acreage 41.194	Print Date 9/23/2024	2023 Taxes: \$ 2,727.54		ESTIMATED	2024 Taxes: \$ 2,809.37
Legal Description SE1/4 41.194AC IS FOR SANGCHRIS LAKE 98-01242 150049.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	36,966	0	0	0	36,966	
	2024	38,075	0	0	0	38,075	

Land Fair Cash Val: 114,225 Building Fair Cash Val: 0 **Non-Farm Value: 114,225**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-06-400-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-06-400-001-01 1691 N 430 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$62,260** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-06-400-001-01	Class 0011	Acreage 70.170	Print Date 9/23/2024	2023 Taxes: \$ 4,411.04		ESTIMATED	2024 Taxes: \$ 4,593.87
Legal Description FARM TRACTS #4 & #9 SE1/4 LY S OF SANGCHRIS LAKE PROPERTY EX A 3 AC TRACT & 4.71 AC TRACT 98-01974 98-01984 98-01970	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	39,782	0	20,000	59,782	
	2024	0	42,260	0	20,000	62,260	

15-12-06-400-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-06-400-001-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,765** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-06-400-001-02	Class 0021	Acreage 23.040	Print Date 9/23/2024	2023 Taxes: \$ 817.24		ESTIMATED	2024 Taxes: \$ 868.08
Legal Description FARM TRACT #8 E1/2 SE1/4 LY E & N OF SANGCHRIS LAKE 98-01982	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	11,076	0	0	11,076	
	2024	0	11,765	0	0	11,765	

15-12-06-400-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-06-400-001-03

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAM FAMILY LP

Address to send notice if different than shown at left:

2356 W BOARMAN RD
DIVERNON IL 62530

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,391** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-06-400-001-03	Class 0021	Acreage 15.870	Print Date 9/23/2024	2023 Taxes: \$ 511.48		ESTIMATED		2024 Taxes: \$ 545.35
Legal Description FARM TRACT #35 NW1/4 SE1/4 LY W OF SANGCHRIS LAKE 98-07609 98-07610 98-04100 98-02609	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	6,932	0	0	6,932		
	2024	0	7,391	0	0	7,391		

15-12-06-400-001-03

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/26/2012	\$5,170,000	2012R07047	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-06-400-001-04 1691 N 430 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$124,498** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-06-400-001-04	Class 0011	Acreage 4.710	Print Date 9/23/2024	2023 Taxes: \$ 8,545.88	ESTIMATED			2024 Taxes: \$ 9,186.11
Legal Description SW COR SW1/4 SE1/4 E493' N24.60' NW304.88' N90.24' N169.31' N187.24' N165.94' N68.60' NE72.19' NE114.34' NE102.78' S178.85' S67.05' W78.63 S839.27' W513' TO	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	12,703	1,280	101,838	0	115,821		
	2024	18,147	1,364	104,987	0	124,498		

15-12-06-400-001-04

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/29/2019	\$700,000	2019R00309	No
01/29/2019	\$1,679,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-06-400-001-05

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$345** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-06-400-001-05	Class 0021	Acreage 3.000	Print Date 9/23/2024	2023 Taxes: \$ 23.70		ESTIMATED	2024 Taxes: \$ 25.46	
Legal Description 3 ACRE TRACT SW COR SE 1/4 98-01974 98-01984 98-01970	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	321	0	0	321		
	2024	0	345	0	0	345		

15-12-06-400-001-05

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-07-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEPARTMENT OF NATURAL RESOURCES
OFFICE REALTY AND ENV PLANNING

1 NATURAL RESOURCES WAY
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-07-100-001-00	Class 9900	Acreage 13.404	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description NW1/4 NW1/4 LY N & W OF ROAD EX SANGCHRIS LAKE ST DOC# 98-11-10 150054.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	
	2024	0	0	0	0	0	0	

15-12-07-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-07-100-001-01

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$73,736 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-12-07-100-001-01

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 01/29/2019, \$16,792,275, 2019R00312, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-07-100-001-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,600** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-07-100-001-02	Class 0083	Acreage 2.826	Print Date 9/23/2024	2023 Taxes: \$ 186.02		ESTIMATED	2024 Taxes: \$ 191.84
Legal Description SW1/4 SANGCHRIS LAKE 2.826AC IS FOR LAKE 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,521	0	0	0	2,521	
	2024	2,600	0	0	0	2,600	

Land Fair Cash Val: 7,800 Building Fair Cash Val: 0 **Non-Farm Value: 7,800**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-07-100-001-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-07-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$108,232** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-07-200-001-00	Class 0021	Acreage 148.030	Print Date 9/23/2024	2023 Taxes: \$ 7,483.30		ESTIMATED	2024 Taxes: \$ 7,985.92
Legal Description FARM TRACTS #2 & #4 NE1/4 LY N ROUTE 104 EXC 20 FT STRIP LY WEST OF THE NE1/4 150054.001 98-01970 98-01974	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	101,420	0	0	101,420	
	2024	0	108,232	0	0	108,232	

15-12-07-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-07-200-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,213** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-07-200-001-01	Class 0021	Acreage 1.730	Print Date 9/23/2024	2023 Taxes: \$ 84.34	ESTIMATED			2024 Taxes: \$ 89.50
Legal Description 20 FT STRIP LY WEST OF THE NE1/4 OF SEC 7 BEG AT THE SWCOR SW1/4 SE1/4 SEC 6 S2465.67' E20' E2445.62' E493.87' N20' E513'TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	1,143	0	0	1,143		
	2024	0	1,213	0	0	1,213		

15-12-07-200-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/29/2019	\$700,000	2019R00309	No
01/29/2019	\$16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-07-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRACKEBUSCH FARMS INC

Address to send notice if different than shown at left:

15403 N FEUCHT RD
PRINCEVILLE IL 61559

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$50,344** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-07-300-001-00	Class 0021	Acreage 75.000	Print Date 9/23/2024	2023 Taxes: \$ 3,492.56		ESTIMATED	2024 Taxes: \$ 3,714.64
Legal Description FARM TRACT #28 SW1/4 LY N&E OF SANGCHRIS LAKE 150056.000 98-01873 98-01875	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	47,334	0	0	47,334	
	2024	0	50,344	0	0	50,344	

15-12-07-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-07-300-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAMBACHER BLANCHE AS TRUSTEE

957 E 1500 NORTH RD

TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,814** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-07-300-001-01	Class 0021	Acreage 43.650	Print Date 9/23/2024	2023 Taxes: \$ 1,859.84		ESTIMATED	2024 Taxes: \$ 1,978.48
Legal Description FARM TRACT #29 SW1/4 LY S&W OF SANGCHRIS LAKE 98-01632	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	25,206	0	0	25,206	
	2024	0	26,814	0	0	26,814	

15-12-07-300-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-07-300-001-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,700** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-07-300-001-02	Class 0083	Acreage 11.554	Print Date 9/23/2024	2023 Taxes: \$ 765.30		ESTIMATED	2024 Taxes: \$ 789.50
Legal Description SW1/2 SANGCHRIS LAKE EX FARM TRACT #28 & FARM TRACT #29 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	10,372	0	0	0	10,372	
	2024	10,700	0	0	0	10,700	

Land Fair Cash Val: 32,100 Building Fair Cash Val: 0 **Non-Farm Value: 32,100**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-07-300-001-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-07-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRACKEBUSCH FARMS INC

Address to send notice if different than shown at left:

15403 N FEUCHT RD
PRINCEVILLE IL 61559

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,695** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-07-400-001-00	Class 0021	Acreage 14.750	Print Date 9/23/2024	2023 Taxes: \$ 811.94		ESTIMATED	2024 Taxes: \$ 862.92
Legal Description FARM TRACT #28 BEG SW COR SE1/4 E242.40 N2650.99 W242.40 S2651.12 TO BEG 98-01873 98-01875 150056.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	11,004	0	0	11,004	
	2024	0	11,695	0	0	11,695	

15-12-07-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-07-400-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$75,877** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-07-400-002-00	Class 0021	Acreage 103.370	Print Date 9/23/2024	2023 Taxes: \$ 5,242.88		ESTIMATED	2024 Taxes: \$ 5,598.60
Legal Description E145A SE EX BEG NE CORNER SE1/4 THENCE S1507.32' W261.25' N105.60' W 238.75' N 87.5' W824.78' N1296.6' W TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	71,056	0	0	71,056	
	2024	0	75,877	0	0	75,877	

15-12-07-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/29/2017	\$2,950,425	2017R04649	No
08/03/2018	\$150,000	2018R02495	No
01/29/2019	\$2,907,725	2019R00308	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-07-400-003-00 N 400 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$45,595** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-07-400-003-00	Class 0011	Acreage 39.630	Print Date 9/23/2024	2023 Taxes: \$ 3,233.86		ESTIMATED	2024 Taxes: \$ 3,364.24
Legal Description E1/2 SE1/4 BEG NE COR S1173.85' W261.2' S227.87' W238.75' N87.5' W824.78 N1296.6' E TO POB 150057.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	27,628	0	16,200	43,828	
	2024	0	29,395	0	16,200	45,595	

15-12-07-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/29/2017	\$2,950,425	2017R04649	No
08/03/2018	\$150,000	2018R02495	No
01/29/2019	\$2,907,725	2019R00308	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-07-400-003-01 1638 N 400 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ROGERS NATHAN A & MICHELLE A

Address to send notice if different than shown at left:

1638 N 400 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$59,716** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-07-400-003-01	Class 0010	Acreage 2.000	Print Date 9/23/2024	2023 Taxes: \$ 4,084.76		ESTIMATED	2024 Taxes: \$ 3,963.45	
Legal Description BEG 1173.85' S OF NE CORNER E1/2 SE1/4 S333.47' W261.25' N333.47' E261.25' TO POB 150057.001 90-02720 85-7905	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,278	0	52,082	0	61,360		
	2024	9,143	0	50,573	0	59,716		

Land Fair Cash Val: 27,429 Building Fair Cash Val: 151,719 **Non-Farm Value: 179,148**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/03/2018	\$150,000	2018R02495	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-07-400-003-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-100-001-00 PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$176,029** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-100-001-00	Class 0011	Acreage 141.890	Print Date 9/23/2024	2023 Taxes: \$ 11,446.74		ESTIMATED 2024 Taxes: \$ 12,988.33	
Legal Description FARM TRACTS 1,2,3 & 4 NW1/4 LY N OF ROUTE 104 & PART W1/2 NWLY LY S ROUTE 104 & N C&IM RR EX 98-01968 98-01970 PART SE1/4 NW1/4	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	7,178	98,773	5,685	43,500	155,136	
	2024	7,077	105,229	20,223	43,500	176,029	

15-12-08-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-100-002-00 IL RTE 104 TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CHRISTIAN COUNTY FARMERS
SUPPLY CO

PO BOX 377
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$70,290** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-100-002-00	Class 0061	Acreage 8.020	Print Date 9/23/2024	2023 Taxes: \$ 5,570.04	ESTIMATED			2024 Taxes: \$ 5,186.36
Legal Description SE1/4 NW1/4 N SIDE RAILROAD RIGHTAWAY TR 1430X250 150061.001 94-4956	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	28,619	0	46,871	0	75,490		
	2024	28,203	0	42,087	0	70,290		

Land Fair Cash Val: 84,609 Building Fair Cash Val: 126,261 **Non-Farm Value: 210,870**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1994	\$101,030		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ____ / ____ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-100-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-100-002-01 TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CHRISTIAN COUNTY FARMERS
SUPPLY CO

PO BOX 377
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-100-002-01	Class 9700	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description POLLUTION CONTROL 120-011-2346	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-12-08-100-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-200-001-00 TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,700** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-200-001-00	Class 0083	Acreage 10.980	Print Date 9/23/2024	2023 Taxes: \$ 264.46		ESTIMATED	2024 Taxes: \$ 273.01
Legal Description PART OF E1/2 NW1/4 & PART OF W1/2 NE1/4 PUMP STATION 150059.000 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,584	0	0	0	3,584	
	2024	3,700	0	0	0	3,700	

Land Fair Cash Val: 11,100 Building Fair Cash Val: 0 **Non-Farm Value: 11,100**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-200-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-200-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$44,317** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-200-001-01	Class 0021	Acreage 88.140	Print Date 9/23/2024	2023 Taxes: \$ 3,000.26		ESTIMATED	2024 Taxes: \$ 3,269.94
Legal Description FARM TRACT #1 NE1/4 LY S & W OF SANGCHRIS LAKE PROPERTY & PART SW1/4 SE1/4 SE1/4 IN SEC 5-13-3W 98-01968	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	40,662	0	0	40,662	
	2024	0	44,317	0	0	44,317	

15-12-08-200-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/29/2019	16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-200-001-02 88 HAROLD ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLEETON REBECCA J

90 HAROLD AVE
PO BOX 198
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$217,500** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for IMPROVEMENT ADDED
Change:

Parcel Number 15-12-08-200-001-02	Class 0061	Acreage 5.440	Print Date 9/23/2024	2023 Taxes: \$ 15,683.78		ESTIMATED 2024 Taxes: \$ 15,870.92	
Legal Description FARM TRACT #1 COMM SE COR NE1/4 TH ALONG E LINE OF SAID NE1/4 N122.59 N LINE C&IM RR W191.92 TO POINT WATER EDGE SANGCHRIS LAKE W1141.52	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	27,630	0	187,376	0	215,006	
	2024	27,227	0	190,273	0	217,500	

Land Fair Cash Val: 81,681 Building Fair Cash Val: 570,819 **Non-Farm Value: 652,500**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/02/2008	\$24,000	2008R02311	No
01/05/2009	\$123,091	2009R00031	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-200-001-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-200-001-03

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,500** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-200-001-03	Class 0083	Acreage 34.080	Print Date 9/23/2024	2023 Taxes: \$ 2,254.00		ESTIMATED	2024 Taxes: \$ 2,324.23
Legal Description NE 1/4 SANGCHRIS LAKE 34.080AC IS FOR SANGCHRIS LAKE 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	30,548	0	0	0	30,548	
	2024	31,500	0	0	0	31,500	

Land Fair Cash Val: 94,500 Building Fair Cash Val: 0 **Non-Farm Value: 94,500**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-200-001-03

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-200-002-00 TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILONCUS PAUL J & MICHAEL

Address to send notice if different than shown at left:

1061 E LANGLEYVILLE RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,650** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-200-002-00	Class 0020	Acreage 6.860	Print Date 9/23/2024	2023 Taxes: \$ 722.50		ESTIMATED		2024 Taxes: \$ 712.03
Legal Description STRIP 250 WIDE N OF C&IM R.R. ON S SIDE SW1/4 NE1/4 & SE1/4 NW1/4 EX W1430 150061.000 71-199704	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,792	0	0	0	9,792		
	2024	9,650	0	0	0	9,650		

Land Fair Cash Val: 28,950 Building Fair Cash Val: 0 **Non-Farm Value: 28,950**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-200-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-300-001-00 TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$57,244** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-300-001-00	Class 0021	Acreage 77.260	Print Date 9/23/2024	2023 Taxes: \$ 3,960.72		ESTIMATED		2024 Taxes: \$ 4,223.76
Legal Description W1/2 SW1/4 EX N 208.71' E 208.71' EX E300 S200 NW1/4 SW1/4 EX E300 N250 SW1/4 SW1/4 72-2569 150063.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	53,679	0	0	53,679		
	2024	0	57,244	0	0	57,244		

15-12-08-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/29/2017	\$2,950,425	2017R04649	No
01/29/2019	\$16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-300-002-00 903 MIDLAND AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

THOMAS JERRY L

903 MIDLAND AVE
PO BOX 125
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$71,727** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-300-002-00	Class 0010	Acreage 1.000	Print Date 9/23/2024	2023 Taxes: \$ 4,377.54	ESTIMATED			2024 Taxes: \$ 4,759.81
Legal Description N208.8 E208.8 THAT PART NW1/4 SW1/4 150063.002 88-3302 86-18406 208X208	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	8,269	0	58,277	0	66,546		
	2024	8,150	0	63,577	0	71,727		

Land Fair Cash Val: 24,450 Building Fair Cash Val: 190,731 **Non-Farm Value: 215,181**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 1218
2024	OWNER OCCUPD IMPROVEMENT	6000 1218

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-300-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-300-003-00 TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$500** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-300-003-00	Class 0083	Acreage 3.100	Print Date 9/23/2024	2023 Taxes: \$ 35.12		ESTIMATED		2024 Taxes: \$ 36.89
Legal Description E300 S200 NW1/4 SW1/4 & E300 N250 SW1/4 SW1/4 150063.001 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	476	0	0	0	476		
	2024	500	0	0	0	500		

Land Fair Cash Val: 1,500 Building Fair Cash Val: 0 **Non-Farm Value: 1,500**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-300-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-300-004-00 TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$815 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 2,445 Building Fair Cash Val: 0 Non-Farm Value: 2,445

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-300-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-300-005-00 TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

3D FAMILY FARMS
%JOHN R & DARLA HOLMES

7549 PARKTRACE LN SE
OWENS X RDS AL 35763

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$27,971 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-08-300-005-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-301-001-00 813 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TUCKER JEFFREY L & BRENDA L

Address to send notice if different than shown at left:

PO BOX 623
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,493** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-301-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,439.64	ESTIMATED			2024 Taxes: \$ 1,537.79
Legal Description GEORGETOWN TOVEY LOTS 6 & 7 BLK 6 MHRE 151083.000 92-5105 114.92X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,856	0	21,329	0	25,185		
	2024	3,800	0	22,693	0	26,493		

Land Fair Cash Val: 11,400 Building Fair Cash Val: 68,079 **Non-Farm Value: 79,479**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-301-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-301-001-01 811 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JOHNSON MARY ANNE

Address to send notice if different than shown at left:

PO BOX 245
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-301-001-01	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 125.84		ESTIMATED 2024 Taxes: \$ 124.04	
Legal Description GEORGETOWN TOVEY LOT 5 BLK 6 2001-07815 151083.001 94-6190 50X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,677	0	0	0	1,677	
	2024	1,653	0	0	0	1,653	

Land Fair Cash Val: 4,959 Building Fair Cash Val: 0 **Non-Farm Value: 4,959**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-301-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-301-002-00 807 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JOHNSON MARY ANNE

Address to send notice if different than shown at left:

PO BOX 245
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,193** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-301-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 459.62	ESTIMATED			2024 Taxes: \$ 614.80
Legal Description GEORGETOWN TOVEY LT 4 BLK 6 2001-07815 151080.000 94-6190 50X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	10,448	0	12,125		
	2024	1,653	0	12,540	0	14,193		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 37,620 **Non-Farm Value: 42,579**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1994	\$32,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-301-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-301-003-01 803 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREGORY MARC S & MELANIE S

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,184** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-301-003-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,275.44	ESTIMATED			2024 Taxes: \$ 2,265.00
Legal Description GEORGETOWN TOVEY LOTS 2 & 3 BLK 6	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
96-05683	2023	3,269	0	27,054	0	30,323		
97-03022 100X130 12-08-F	2024	3,307	0	26,877	0	30,184		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 80,631 **Non-Farm Value: 90,552**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1997	\$29,000		Yes
07/07/2021	\$41,000	2021R02765	No
10/26/2022	\$52,500	2022R03945	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-301-003-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-301-004-00 801 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREGORY MARC S & MELANIE S

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,150** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-301-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 606.92	ESTIMATED			2024 Taxes: \$ 911.73
Legal Description GEORGETOWN TOVEY LT 1 BLK 6 2000-06497 151077.000 2000-05388 50X130 12-08-F CFD1995	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	6,411	0	8,088		
	2024	1,653	0	10,497	0	12,150		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 31,491 **Non-Farm Value: 36,450**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2000	\$18,000		Yes
08/22/2005	\$18,900	2005R04756	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-301-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-301-005-00 800 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CHAMNESS DAMON J

P O BOX
800 MASON ST
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,677** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-301-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,363.46		ESTIMATED	2024 Taxes: \$ 206.81	
Legal Description GEORGETOWN TOVEY LTS 13 & 14 BLK 6 151089.000 92-4957 100X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	34,141	0	37,496		
	2024	1,830	0	3,847	0	5,677		

Land Fair Cash Val: 5,490 Building Fair Cash Val: 11,541 **Non-Farm Value: 17,031**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
10/01/1992	\$46,500		Yes
06/25/2019	\$98,000	2019R02010	No
08/14/2020	\$102,000	2020R03081	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-301-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-301-006-00 804 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HANLON PATRICK S & TERESA

804 MASON ST
PO BOX 164
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,270** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-301-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 812.62	ESTIMATED			2024 Taxes: \$ 920.74
Legal Description GEORGETOWN TOVEY LOTS 11 & 12 BLK 6	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
151088.000	2023	3,355	0	13,474	0	16,829		
92-3834 100X130 12-08-F	2024	3,307	0	14,963	0	18,270		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 44,889 **Non-Farm Value: 54,810**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-301-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-301-007-00 808 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

TUCKER JEFFREY L & BRENDA L

Address to send notice if different than shown at left:

PO BOX 623
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$10,150 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 4,959 Building Fair Cash Val: 25,491 Non-Farm Value: 30,450

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes data for 08/24/2005 sale.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-301-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-301-008-00 812 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

TUCKER JEFFREY L & BRENDA L

Address to send notice if different than shown at left:

PO BOX 623
KINCAID

IL 62540

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$3,307 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for Year, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 9,921 Building Fair Cash Val: 0 Non-Farm Value: 9,921

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 08/24/2005, \$18,000, 2005R04823, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-301-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-302-001-00 713 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GRAFTON PATRICK J & WENDY L

713 MIDLAND BLVD
PO BOX 175
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,267** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-302-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 817.04	ESTIMATED			2024 Taxes: \$ 920.51
Legal Description GEORGETOWN TOVEY LOTS 6 7 & 8 BLK 5 MHRE 151067.000 96-02727 150X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	13,856	0	18,888		
	2024	4,960	0	15,307	0	20,267		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 45,921 **Non-Farm Value: 60,801**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled Person	6000 2000
2024	OWNER OCCUPD Disabled Person	6000 2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-302-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-302-002-00 707 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VANDEVENTER BRENDINA

707 MIDLAND BLVD
PO BOX 154
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,660** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-302-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 979.20	ESTIMATED			2024 Taxes: \$ 1,325.20
Legal Description GEORGETOWN TOVEY LOTS 3 4 & 5 BLK 5 151064.000 78-21060 150X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	19,017	0	24,049		
	2024	4,960	0	23,700	0	28,660		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 71,100 **Non-Farm Value: 85,980**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY OWNER OCCUPD	5000
		6000
2024	ELDERLY OWNER OCCUPD	5000
		6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-302-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-302-003-00 701 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L & VICKIE L

Address to send notice if different than shown at left:

PO BOX 55
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,967** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-302-003-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 307.74	ESTIMATED			2024 Taxes: \$ 973.04
Legal Description GEORGETOWN TOVEY LTS 1 & 2 BLK 5 ST DOC NO 85 11 90 151061.000 100X130 CITY HALL 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,178	0	1,923	0	4,101		
	2024	3,307	0	9,660	0	12,967		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 28,980 **Non-Farm Value: 38,901**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/24/2009	\$9,000	2009R04363	No
05/08/2020	\$10,000	2020R01562	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-302-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-302-004-00 175 JOSEPHINE AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FROST JOSEPH E

Address to send notice if different than shown at left:

PO BOX 284
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,633** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-302-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 802.48	ESTIMATED			2024 Taxes: \$ 1,098.06
Legal Description GEORGETOWN TOVEY LT 16 BLK 5 151076.000 2004R00119 50X130 12-08-F 2001R05741 1995R02568	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	15,017	0	16,694		
	2024	1,653	0	18,980	0	20,633		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 56,940 **Non-Farm Value: 61,899**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/2004	\$59,200		Yes
04/03/2007	\$49,900	2007R01570	No
06/20/2016	\$22,500	2016R02199	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-302-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-302-005-00 702 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MORRIS MARY

Address to send notice if different than shown at left:

PO BOX 121
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,836** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-302-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description GEORGETOWN TOVEY LT 15 BLK 5 151075.000 91-05492 50X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	2,551	0	4,228		
	2024	1,653	0	2,183	0	3,836		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 6,549 **Non-Farm Value: 11,508**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled Person	3728 500
2024	OWNER OCCUPD Disabled Person	3336 500

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1991	\$14,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-302-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-302-006-00 704 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREGORY MARC S

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-302-006-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 125.84		ESTIMATED		2024 Taxes: \$ 124.04
Legal Description GEORGETOWN TOVEY LT 14 BLK 5 151074.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
93-01369 50X130 12-08-F	2023	1,677	0	0	0	1,677		
	2024	1,653	0	0	0	1,653		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 0 **Non-Farm Value: 4,959**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1993	\$4,500		Yes
06/03/2009	\$750	2009R03258	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-302-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-302-007-00 706 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WESTENHAVER GEORGE JR

Address to send notice if different than shown at left:

706 MASON ST
TOVEY IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,857** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-302-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description GEORGETOWN TOVEY LOTS 12 & 13 BLK 5 99-02228 151073.000 90-03930 100X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,178	0	1,567	0	3,745		
	2024	3,307	0	3,550	0	6,857		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 10,650 **Non-Farm Value: 20,571**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled Person	3245 500
2024	OWNER OCCUPD Disabled Person	6000 857

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1999	\$18,000		Yes
06/10/2009	\$10,000	2009R03414	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-302-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-302-008-00 710 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

YEAMAN JIMMIE L

PO BOX
710 MASON ST
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,410** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: A REVALUATION OF PROPERTY.

Parcel Number 15-12-08-302-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,881.10	ESTIMATED			2024 Taxes: \$ 1,550.55
Legal Description GEORGETOWN TOVEY LOTS 9 10 & 11 BLK 5 MHRE 151071.000 88-3323 150X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,898	0	31,170	0	36,068		
	2024	4,960	0	27,450	0	32,410		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 82,350 **Non-Farm Value: 97,230**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD IMPROVEMENT ELDERLY	6000 747 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/13/2022	\$95,000	2022R00169	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-302-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-303-001-00 615 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L & VICKIE L

Address to send notice if different than shown at left:

PO BOX 55
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$48,897** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-303-001-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,671.40		ESTIMATED		2024 Taxes: \$ 3,669.22
Legal Description GEORGETOWN TOVEY LOTS 6 7 & 8 BLK 4 2003R01562 150X130' 151052.000 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	43,894	0	48,926		
	2024	4,960	0	43,937	0	48,897		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 131,811 **Non-Farm Value: 146,691**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-303-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-303-004-00 603 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROOKS BRETT & TIFFANY

Address to send notice if different than shown at left:

PO BOX 188
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$58,596** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-303-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,562.60		ESTIMATED		2024 Taxes: \$ 3,946.79
Legal Description GEORGETOWN TOVEY LOTS 1 2 3 4 & 5 BLK 4 1989R09067 250X130' 151040.000 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,193	0	49,283	0	53,476		
	2024	8,263	0	50,333	0	58,596		

Land Fair Cash Val: 24,789 Building Fair Cash Val: 150,999 **Non-Farm Value: 175,788**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-303-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-303-005-00 175 CAVATORTA AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LAHR AUDREY

175 CAVATORTA AVE
PO BOX 187
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,970** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-303-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 336.94	ESTIMATED			2024 Taxes: \$ 336.93
Legal Description GEORGETOWN TOVEY LOTS 14 15 & 16 BLK 4 MHRE 130X150' 1973R07093 151060.000 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	14,028	0	19,060		
	2024	4,960	0	14,010	0	18,970		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 42,030 **Non-Farm Value: 56,910**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	3570
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	3480

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-303-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-303-009-00 610 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BURNEY CHARLIE R III & MEAGAN N

Address to send notice if different than shown at left:

PO BOX 145
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,663** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-303-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,732.74		ESTIMATED		2024 Taxes: \$ 1,700.63
Legal Description GEORGETOWN TOVEY LOTS 10 11 12 & 13 BLK 4 2001R01030 2001R05384 151055.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,711	0	22,380	0	29,091		
	2024	6,610	0	22,053	0	28,663		

Land Fair Cash Val: 19,830 Building Fair Cash Val: 66,159 **Non-Farm Value: 85,989**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/23/2015	\$15,000	2015R04115	Yes
03/10/2016	\$73,750	2016R00883	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-303-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-303-011-00 614 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L & VICKIE L

Address to send notice if different than shown at left:

PO BOX 55
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-303-011-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 122.62		ESTIMATED		2024 Taxes: \$ 124.04
Legal Description GEORGETOWN TOVEY LOT 9 BLK 4 151053.000 2001-06400 50X130 12-08-F 81-39630	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,634	0	0	0	1,634		
	2024	1,653	0	0	0	1,653		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 0 Non-Farm Value: 4,959

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
09/01/2001	\$6,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-303-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-304-001-00 811 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCOTT JOSEPH L & KARI L

Address to send notice if different than shown at left:

811 MASON ST
TOVEY IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,830** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-304-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,619.74		ESTIMATED		2024 Taxes: \$ 1,713.16
Legal Description GEORGETOWN 1ST ADD TOVEY LTS 5 6 & 7 BLK 6 151184.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
B308 P12 164X130 12-08-F	2023	5,505	0	22,080	0	27,585		
	2024	5,427	0	23,403	0	28,830		

Land Fair Cash Val: 16,281 Building Fair Cash Val: 70,209 **Non-Farm Value: 86,490**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/11/2009	\$75,000	2009R03437	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-304-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-304-002-00 805 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRISON CYNTHIA & MAX F

805 MASON ST
PO BOX 12
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,067** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-304-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 474.04	ESTIMATED			2024 Taxes: \$ 474.03
Legal Description GEORGETOWN 1ST ADD TOVEY LTS 3 & 4 BLK 6 151181.000 91-04058 100X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	19,061	0	22,416		
	2024	3,307	0	20,760	0	24,067		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 62,280 **Non-Farm Value: 72,201**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	5099
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	6750

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-304-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-304-003-00 801 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ROMANOTTO JOSEPH A

P O BOX
801 MASON ST
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,630** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-304-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,273.36		ESTIMATED	2024 Taxes: \$ 1,247.91	
Legal Description GEORGETOWN 1ST ADD TOVEY LOTS 1 & 2 BLK 6 BK253 PG858 100X130' 151179.000 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	19,614	0	22,969		
	2024	3,307	0	19,323	0	22,630		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 57,969 **Non-Farm Value: 67,890**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2009	\$38,500	2009R03849	Yes
05/07/2018	\$56,000	2018R01416	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-304-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-304-004-00 800 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREGORY MARC S & MELANIE S

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,130** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-304-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,038.48	ESTIMATED			2024 Taxes: \$ 1,060.31
Legal Description GEORGETOWN 1ST ADD TOVEY LTS 13 & 14 BLK 6 151191.000 2000-02222 100X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	10,484	0	13,839		
	2024	3,307	0	10,823	0	14,130		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 32,469 **Non-Farm Value: 42,390**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2000	\$27,500		Yes
01/13/2011	\$32,000	2011R00211	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-304-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-304-005-00 804 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRISON JAMES L

Address to send notice if different than shown at left:

PO BOX 88
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,817** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-304-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 835.42	ESTIMATED			2024 Taxes: \$ 1,487.06
Legal Description GEORGETOWN 1ST ADD TOVEY LOT 11 & 12 BLK 6 100X130' 151190.000 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	25,973	0	29,328		
	2024	3,307	0	27,510	0	30,817		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 82,530 **Non-Farm Value: 92,451**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	7195
2024	OWNER OCCUPD	6000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-304-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-304-007-00 808 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRISON JAMES L

Address to send notice if different than shown at left:

PO BOX 88
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-304-007-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 125.84		ESTIMATED		2024 Taxes: \$ 124.04
Legal Description GEORGETOWN 1ST ADD TOVEY LT 10 BLK 6 151188.000 92-02452 50X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	0	0	1,677		
	2024	1,653	0	0	0	1,653		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 0 **Non-Farm Value: 4,959**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-304-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-304-008-00 810 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLARK MARLENE R & CHRISTOPHER E

810 LINKINS AVE
PO BOX 244
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$39,706** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-304-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,235.52		ESTIMATED	2024 Taxes: \$ 2,452.53
Legal Description GEORGETOWN 1ST ADD TOVEY LOTS 8 & 9 BLK 6 2003R00294 151186.000 98-05105 116X130AV 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,892	0	32,922	0	36,814	
	2024	3,833	0	35,873	0	39,706	

Land Fair Cash Val: 11,499 Building Fair Cash Val: 107,619 **Non-Farm Value: 119,118**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 1023
2024	OWNER OCCUPD IMPROVEMENT	6000 1023

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/2003	\$84,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-304-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-305-001-00 715 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GROSS MICHAEL L & KATHLEEN

Address to send notice if different than shown at left:

PO BOX 185
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,446** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-305-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 138.52		ESTIMATED		2024 Taxes: \$ 183.55
Legal Description GEORGETOWN 1ST ADD TOVEY LT 8 BLK 5 151170.000 B211 P101 50X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	169	0	1,846		
	2024	1,653	0	793	0	2,446		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 2,379 **Non-Farm Value: 7,338**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/05/2012	\$2,100	2012R00074	No
10/19/2018	\$4,500	2018R03464	Yes
05/07/2021	\$35,500	2021R01880	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-305-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-305-002-00 713 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GROSS MICHAEL L & KATHLEEN

PO BOX 185
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-305-002-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 125.84	ESTIMATED			2024 Taxes: \$ 124.04
Legal Description GEORGETOWN 1ST ADD TOVEY LT 7 BLK 5 151169.000 50X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	0	0	1,677		
	2024	1,653	0	0	0	1,653		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 0 Non-Farm Value: 4,959

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/26/2006	\$1,500	2006R05351	No
11/20/2013	\$42,000	2013R05171	No
05/07/2021	\$35,500	2021R01880	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-305-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-305-003-00 711 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GROSS MICHAEL L & KATHLEEN

Address to send notice if different than shown at left:

PO BOX 185
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,504** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-305-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,231.78		ESTIMATED	2024 Taxes: \$ 1,163.42	
Legal Description GEORGETOWN 1ST ADD TOVEY LTS 5 & 6 BLK 5 151168.000 2004R04484 100X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	13,060	0	16,415		
	2024	3,307	0	12,197	0	15,504		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 36,591 **Non-Farm Value: 46,512**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
07/01/2004	\$25,000		Yes
05/07/2021	\$35,500	2021R01880	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-305-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-305-006-00 225 JOSEPHINE AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GROSS MICHAEL L

225 JOSEPHINE AVE
PO BOX 185
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,790** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-305-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 982.36	ESTIMATED			2024 Taxes: \$ 982.35
Legal Description GEORGETOWN 1ST ADD TOVEY LOTS 1 2 3 & 4 BLK 5 200X130' 2000R06190 1987R20949 151163.000 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,711	0	25,673	0	32,384		
	2024	6,610	0	26,180	0	32,790		

Land Fair Cash Val: 19,830 Building Fair Cash Val: 78,540 **Non-Farm Value: 98,370**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	SEN FREEZE	6293
	ELDERLY	5000
2024	OWNER OCCUPD	6000
	Disabled Person	2000
	SEN FREEZE	6699
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-305-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-305-007-00 702 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PRINCE JOSHUA J

702 LINKINS AVE
PO BOX 208
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,307** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-305-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,545.68		ESTIMATED	2024 Taxes: \$ 1,974.07
Legal Description GEORGETOWN 1ST ADD TOVEY E36 LT 14 & ALL LTS 15 & 16 BLK 5 151178.000 96-05627 136X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,562	0	22,036	0	26,598	
	2024	4,497	0	27,810	0	32,307	

Land Fair Cash Val: 13,491 Building Fair Cash Val: 83,430 **Non-Farm Value: 96,921**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1996	\$35,000		No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-305-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-305-008-00 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PRINCE JOSHUA J

702 LINKINS AVE
PO BOX 208
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,544** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: IMPROVEMENT ADDED, MAY QUALIFY FOR AN IMPROVEMENT EXEMPTION. CHECK WITH BOARD OF REVIEW.

Parcel Number 15-12-08-305-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 161.04	ESTIMATED			2024 Taxes: \$ 165.54
Legal Description GEORGETOWN 1ST ADD TOVEY LT 13 & W14 LT 14 BLK 5 151175.000 97-03456 64X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,145	0	7,339	0	9,484		
	2024	2,117	0	7,427	0	9,544		

Land Fair Cash Val: 6,351 Building Fair Cash Val: 22,281 **Non-Farm Value: 28,632**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	7338
2024	IMPROVEMENT	7338

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1997	\$3,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-305-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-305-009-00 708 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HELLMAN HOLLY

APT 22
6531 MISTA DR
ALLENDALE MI 49401

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,574** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-305-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 80.00		ESTIMATED 2024 Taxes: \$ 118.11	
Legal Description GEORGETOWN 1ST ADD TOVEY LT 12 BLK 5 151174.000 2004R04647 50X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	607	0	459	0	1,066	
	2024	597	0	977	0	1,574	

Land Fair Cash Val: 1,791 Building Fair Cash Val: 2,931 **Non-Farm Value: 4,722**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1998	\$15,000		Yes
10/27/2021	\$730	2021R04572	No
08/08/2022	\$650	2022R02918	No
07/17/2023	\$5,550	2023R01963	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-305-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-305-010-00 710 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HERR GARY & CAROLE

710 LINKINS AVE
PO BOX 199
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,373** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-305-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 267.22	ESTIMATED			2024 Taxes: \$ 328.15
Legal Description GEORGETOWN 1ST ADD TOVEY LT 11 BLK 5 MHRE 151173.000 95-03393 50X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	7,884	0	9,561		
	2024	1,653	0	8,720	0	10,373		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 26,160 **Non-Farm Value: 31,119**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/25/2007	\$25,000	2007R03127	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-305-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-305-011-00 714 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRACEY MICHAEL T & HEATHER C

714 LINKINS AVE
PO BOX 86
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,330** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-305-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,322.74	ESTIMATED			2024 Taxes: \$ 1,450.52
Legal Description GEORGETOWN 1ST ADD TOVEY LOTS 9 & 10 BLK 5 151171.000 98-05003 100X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	20,272	0	23,627		
	2024	3,307	0	22,023	0	25,330		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 66,069 **Non-Farm Value: 75,990**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1998	\$27,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-305-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-306-001-00 611 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SISTI CHRISTOPHER

211 COMMONWEALTH
PO BOX 452
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,036** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-306-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,655.38		ESTIMATED	2024 Taxes: \$ 1,578.54	
Legal Description GEORGETOWN 1ST ADD TOVEY LOTS 5 6 7 & 8 BLK 4 151152.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
90-02101 200X130 12-08-F	2023	5,533	0	16,527	0	22,060		
	2024	6,613	0	14,423	0	21,036		

Land Fair Cash Val: 19,839 Building Fair Cash Val: 43,269 **Non-Farm Value: 63,108**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/27/2024	\$27,321	2024R01862	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-306-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-306-002-00 601 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SISTI CHRISTOPHER

211 COMMONWEALTH
PO BOX 452
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,610** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-306-002-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 428.48	ESTIMATED			2024 Taxes: \$ 496.01
Legal Description GEORGETOWN 1ST ADD TOVEY LOTS 1 2 3 & 4 BLK 4 151147.000 90-02101 200X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,710	0	0	0	5,710		
	2024	6,610	0	0	0	6,610		

Land Fair Cash Val: 19,830 Building Fair Cash Val: 0 **Non-Farm Value: 19,830**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/27/2024	\$27,321	2024R01862	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-306-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-306-003-00 602 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREGORY MARC S & MELANIE S

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,540** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-306-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 996.60	ESTIMATED			2024 Taxes: \$ 1,016.04
Legal Description GEORGETOWN 1ST ADD TOVEY LOTS 15 & 16 BLK 4 151161.000 96-00245 100X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	9,926	0	13,281		
	2024	3,307	0	10,233	0	13,540		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 30,699 **Non-Farm Value: 40,620**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/1996	\$33,000		Yes
12/15/2004	\$45,000	2004R07841	Yes
10/21/2022	\$15,000	2022R03875	No
10/26/2022	\$34,000	2022R03937	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-306-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-306-004-00 604 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOOMEY DONALD W & BRIDGET L

Address to send notice if different than shown at left:

PO BOX 225
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,580** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-08-306-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 479.06	ESTIMATED			2024 Taxes: \$ 2,444.80
Legal Description GEORGETOWN 1ST ADD TOVEY LT 14 BLK 4 151160.000 81-39266 50X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	10,707	0	12,384		
	2024	1,653	0	30,927	0	32,580		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 92,781 **Non-Farm Value: 97,740**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/24/2015	\$6,000	2015R02448	No
07/15/2015	\$11,250	2015R02747	No
01/05/2016	\$30,000	2016R00034	Yes
01/04/2021	\$19,500	2021R00023	No
03/17/2021	\$27,000	2021R010079	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-306-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-306-005-00 606 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

STALEY JOLYN &
NANCY MILNER
606 LINKINS AVE
PO BOX 242
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,560** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-306-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 51.86		ESTIMATED	2024 Taxes: \$ 117.06	
Legal Description GEORGETOWN 1ST ADD E1/2 LT 12 & ALL 13 BLK 4 151159.000 88-932 75X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,141	0	6,550	0	8,691		
	2024	2,480	0	7,080	0	9,560		

Land Fair Cash Val: 7,440 Building Fair Cash Val: 21,240 **Non-Farm Value: 28,680**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled Person	6000 2000
2024	OWNER OCCUPD Disabled Person	6000 2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/1988	\$5,500		Yes
08/16/2021	\$20,000	2021R03459	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-306-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-306-007-00 612 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAMPBELL ZACHARY

P O BOX
612 LINKINS AVE
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,831** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-306-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,149.46		ESTIMATED 2024 Taxes: \$ 1,488.11	
Legal Description GEORGETOWN 1ST ADD TOVEY LOTS 10 & 11 & W1/2 LOT 12 BLK 4 2001R06418 125X130' 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,193	0	11,125	0	15,318	
	2024	4,133	0	21,698	0	25,831	

Land Fair Cash Val: 12,399 Building Fair Cash Val: 65,094 **Non-Farm Value: 77,493**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	0
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1996	\$14,750		Yes
10/26/2006	\$6,000	2006R05356	No
05/19/2023	\$77,500	2023R01350	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-306-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-306-008-00 614 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAVIS BEAU
% SHERRI AYMER
P O BOX
614 LINKINS AVE
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,860** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-306-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 268.20	ESTIMATED			2024 Taxes: \$ 364.69
Legal Description GEORGETOWN 1ST ADD TOVEY LT 9 BLK 4 94-7323 151155.000 B21 P365 50X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	7,897	0	9,574		
	2024	1,653	0	9,207	0	10,860		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 27,621 **Non-Farm Value: 32,580**

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History

Amount

Tax Year 2023	OWNER OCCUPD	6000
Tax Year 2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1994	\$25,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-306-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-307-001-00 811 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DOWNS BARBARA J & RICKY

P O BOX
811 LINKINS AVE
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,170** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-08-307-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 628.92		ESTIMATED	2024 Taxes: \$ 628.91
Legal Description GEORGETOWN 2ND ADD TOVEY LOTS 6 & 7 BLK 6 2003R03655 1979R27622 114X130' 151277.000 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,822	0	18,252	0	22,074	
	2024	3,770	0	19,400	0	23,170	

Land Fair Cash Val: 11,310 Building Fair Cash Val: 58,200 **Non-Farm Value: 69,510**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	2693
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	3789

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2003	\$58,500	2003R03655	Yes
07/10/2005	\$65,000	2005R03902	No
09/02/2008	\$37,000	2008R04540	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-307-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-307-002-00 807 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BEACH ROSALEE

Address to send notice if different than shown at left:

PO BOX 63
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$64,297** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-307-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 4,070.76		ESTIMATED		2024 Taxes: \$ 3,999.40
Legal Description GEORGETOWN 2ND ADD TOVEY LTS 3 4 5 BLK 6 2003R07345 151274.000 93-03909 130X150 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	60,216	0	65,248		
	2024	4,960	0	59,337	0	64,297		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 178,011 **Non-Farm Value: 192,891**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2003	\$14,000		Yes
02/21/2017	\$14,000	2017R00656	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-307-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-307-003-00 325 ANNIE AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MAYBERRY ROBERT E SR & GENEVIEVE M

Address to send notice if different than shown at left:

PO BOX 217
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,577** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-307-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 529.12	ESTIMATED			2024 Taxes: \$ 568.58
Legal Description GEORGETOWN 2ND ADD TOVEY LTS 1 & 2 BLK 6 97-03937 151272.000 2000-05595 100X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	3,696	0	7,051		
	2024	3,307	0	4,270	0	7,577		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 12,810 **Non-Farm Value: 22,731**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
07/01/1997	\$15,000		Yes
07/02/2007	\$25,000	2007R03284	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-307-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-307-004-00 375 ANNIE AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAKE ZACHARY M &
SARA A WAKE

PO BOX 223
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,998** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-307-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 575.56		ESTIMATED 2024 Taxes: \$ 1,500.65	
Legal Description GEORGETOWN 2ND ADD TOVEY E1/2 LOT 13 & ALL LOT 14 BLK 6 151285.000 2004R00561 75X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,514	0	15,280	0	17,794	
	2024	2,480	0	23,518	0	25,998	

Land Fair Cash Val: 7,440 Building Fair Cash Val: 70,554 **Non-Farm Value: 77,994**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 4124
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2001	\$54,900		Yes
01/16/2009	\$29,000	2009R00250	No
12/16/2014	\$35,000	2014R05306	Yes
10/19/2021	\$78,000	2021R04436	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-307-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-307-005-00 804 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SUMMERSON JOSEPH E II & TERRI

Address to send notice if different than shown at left:

693 HOMESTEAD DR
GLENARM IL 62536

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$11,326 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 12,399 Building Fair Cash Val: 21,579 Non-Farm Value: 33,978

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes data for 03/01/2003 sale.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-307-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-307-006-00 812 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NOREUIL JAMES L & DEBRA A

812 BORAH AVE
PO BOX 124
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$48,006** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-307-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,477.30		ESTIMATED	2024 Taxes: \$ 2,776.92
Legal Description GEORGETOWN 2ND ADD TOVEY LTS 8 9 & 10 BLK 6 2003R07351 151279.000 76-5824 150X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,533	0	38,480	0	44,013	
	2024	5,453	0	42,553	0	48,006	

Land Fair Cash Val: 16,359 Building Fair Cash Val: 127,659 **Non-Farm Value: 144,018**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2003	\$136,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-307-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-308-001-00 715 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PUCETTI ALBERT & MARGARET M

715 LINKINS AVE
PO BOX 68
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,217** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-308-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 1,742.20
Legal Description GEORGETOWN 2ND ADD TOVEY W1/2 LT 7 & ALL LT 8 BLK 5 151263.000 75X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,514	0	18,593	0	21,107		
	2024	2,480	0	20,737	0	23,217		

Land Fair Cash Val: 7,440 Building Fair Cash Val: 62,211 **Non-Farm Value: 69,651**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023	
ELDERLY	5000
OWNER OCCUPD	6000
SEN FREEZE	10107

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-308-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-308-002-00 711 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARMS DEANNA L

Address to send notice if different than shown at left:

PO BOX 193
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$36,896** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-308-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,044.78		ESTIMATED		2024 Taxes: \$ 1,044.78
Legal Description GEORGETOWN 2ND ADD TOVEY LOTS 5 & 6 & E1/2 LT 7 BLK 5 2001R03367 1999R06408 1991R03832 1987R19103 125X130' 151261.000 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,193	0	30,121	0	34,314		
	2024	4,133	0	32,763	0	36,896		

Land Fair Cash Val: 12,399 Building Fair Cash Val: 98,289 **Non-Farm Value: 110,688**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	7391
	Disabled Person	2000
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	9973
	Disabled Person	2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-308-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-308-004-00 707 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FODOR DAVID LEE

Address to send notice if different than shown at left:

PO BOX 67
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,233** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-308-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 37.52		ESTIMATED	2024 Taxes: \$ 37.52
Legal Description GEORGETOWN 2ND ADD TOVEY LTS 3 & 4 BLK 5 151259.000 81-35063 100X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,854	0	308	0	2,162	
	2024	1,830	0	403	0	2,233	

Land Fair Cash Val: 5,490 Building Fair Cash Val: 1,209 **Non-Farm Value: 6,699**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	1662
2024	OWNER OCCUPD	1733

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-308-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-308-005-00 703 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WOODS SCOTT R

703 LINKINS AVE
PO BOX 212
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,766** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-308-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 395.62	ESTIMATED			2024 Taxes: \$ 432.68
Legal Description GEORGETOWN 2ND ADD TOVEY LT 2 BLK 5 151257.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
98-02588 50X130 12-08-F	2023	1,677	0	9,595	0	11,272		
	2024	1,653	0	10,113	0	11,766		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 30,339 **Non-Farm Value: 35,298**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1998	\$30,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-308-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-308-006-00 701 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MAGOS JOSEPHINE

701 LINKINS AVE
PO BOX 88
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,500** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-308-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description GEORGETOWN 2ND ADD TOVEY LT 1 BLK 5 151256.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
B201 P255 50X130 12-08-F	2023	1,677	0	10,410	0	12,087		
	2024	1,653	0	10,847	0	12,500		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 32,541 **Non-Farm Value: 37,500**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	1087
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	1500

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-308-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-308-007-00 375 JOSEPHINE AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NORVILLE DARIAN A

PO BOX
375 COLUMBUS AVE
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,590** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-308-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,781.66	ESTIMATED			2024 Taxes: \$ 3,289.52
Legal Description GEORGETOWN 2ND ADD TOVEY LOTS 14 15 & 16 BLK 5 151269.000 2004R02495 150X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	38,037	0	43,069		
	2024	4,960	0	47,630	0	52,590		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 142,890 **Non-Farm Value: 157,770**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2024	IMPROVEMENT	2753

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1994	\$67,000		Yes
04/13/2015	\$95,000	2015R01367	Yes
07/23/2018	\$105,000	2018R02328	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-308-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-308-008-00 706 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PRUETT JUSTIN & LACY L DENNEY

P O BOX
706 BORAH AVE
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,490** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-308-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,704.38	ESTIMATED			2024 Taxes: \$ 1,566.61
Legal Description GEORGETOWN 2ND ADD TOVEY LOTS 12 & 13 BLK 5 2002R02392 100X130' 151268.000 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	25,971	0	29,326		
	2024	3,307	0	24,183	0	27,490		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 72,549 **Non-Farm Value: 82,470**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	613
2024	IMPROVEMENT	613

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/2002	\$42,500		Yes
05/21/2008	\$64,000	2008R02686	No
08/18/2011	\$67,000	2011R03562	Yes
04/25/2018	\$65,000	2018R01245	No
06/14/2019	\$70,000	2019R01909	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-308-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-308-010-00 712 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PUCETTI MARK A & KRISTIN L

Address to send notice if different than shown at left:

PO BOX 18
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$85,643** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-308-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 5,732.60	ESTIMATED			2024 Taxes: \$ 5,976.39
Legal Description GEORGETOWN 2ND ADD TOVEY LOTS 9 10 & 11 BLK 5 2004R03221 151265.000 88-436 150X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	77,362	0	82,394		
	2024	4,960	0	80,683	0	85,643		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 242,049 **Non-Farm Value: 256,929**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/1987	\$6,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-308-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-309-001-00 615 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KLEBE ROBERT F

Address to send notice if different than shown at left:

587 E 1900 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,633** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-309-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,030.68	ESTIMATED			2024 Taxes: \$ 1,248.14
Legal Description GEORGETOWN 2ND ADD TOVEY LTS 7 & 8 BLK 4 2003R06917 151246.000 89-7086 100X132 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,393	0	16,342	0	19,735		
	2024	3,340	0	19,293	0	22,633		

Land Fair Cash Val: 10,020 Building Fair Cash Val: 57,879 **Non-Farm Value: 67,899**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/16/2020	\$54,500	2020R04563	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-309-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-309-002-00 611 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOLLET HARRY E &
SHARON A TURLEY SHOEMAKER
611 LINKINS
PO BOX 196
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,023** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-08-309-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 700.96	ESTIMATED			2024 Taxes: \$ 827.16
Legal Description GEORGETOWN 2ND ADD TOVEY LTS 4, 5 & 6 BLK 4 92-03343 151245.000 97-01157 150X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	12,309	0	17,341		
	2024	4,960	0	14,063	0	19,023		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 42,189 **Non-Farm Value: 57,069**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled Person	6000 2000
2024	OWNER OCCUPD Disabled Person	6000 2000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1997	\$20,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-309-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-309-003-00 605 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FASSERO BRIAN A

Address to send notice if different than shown at left:

3325 S 3RD ST
SPRINGFIELD

IL 62703

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,990** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-309-003-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 461.80	ESTIMATED			2024 Taxes: \$ 674.61
Legal Description GEORGETOWN 2ND ADD TOVEY LTS 1 2 & 3 BLK 4 151242.000 81-39266 150X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,785	0	3,369	0	6,154		
	2024	4,960	0	4,030	0	8,990		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 12,090 **Non-Farm Value: 26,970**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/24/2006	\$55,000	2006R00344	Yes
08/23/2017	\$15,000	2017R03084	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-309-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-309-004-00 600 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROWNS RENTAL PROPERTIES LLC

7550 MINDER RD
ROCHESTER IL 62563

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$79,053** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-309-004-00	Class 0050	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 5,182.48	ESTIMATED			2024 Taxes: \$ 5,932.12
Legal Description GEORGETOWN 2ND ADD TOVEY LTS 9 THRU 16 BLK 4 DOC NO 85 11 135 CHAS W THOMAS APTS 16 UNITS 400X130	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	13,417	0	55,646	0	69,063		
	2024	13,223	0	65,830	0	79,053		

Land Fair Cash Val: 39,669 Building Fair Cash Val: 197,490 **Non-Farm Value: 237,159**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/15/2018	\$330,000	2018R03808	No
09/02/2022	\$464,000	2022R03228	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-309-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-310-001-00 809 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HUNT RE TRUST NO 812
 %DANIEL W GRANQUIST
 UNIT 892
 1070 S CALUMET RD
 CHESTERTON IN 46304

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,480** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-310-001-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 417.46		ESTIMATED 2024 Taxes: \$ 411.22	
Legal Description GEORGETOWN 3RD ADD TOVEY LOTS 5 6 & 7 BLK 6 99-02088 151354.000 165X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,563	0	0	0	5,563	
	2024	5,480	0	0	0	5,480	

Land Fair Cash Val: 16,440 Building Fair Cash Val: 0 Non-Farm Value: 16,440

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-310-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-310-002-00 805 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CARRIKER JODY M & JOHN

Address to send notice if different than shown at left:

PO BOX 243
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,694** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-310-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,266.08	ESTIMATED			2024 Taxes: \$ 1,477.83
Legal Description GEORGETOWN 3RD ADD TOVEY LTS 3 & 4 BLK 6 151352.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
2002-01303 100X130 12-08-F	2023	3,355	0	19,517	0	22,872		
	2024	3,307	0	22,387	0	25,694		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 67,161 **Non-Farm Value: 77,082**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/2001	\$37,500		Yes
10/27/2006	\$45,880	2006R05368	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-310-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-310-004-00 801 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TANNER TRAVIS & MEGAN

801 BORAH AVE
PO BOX 93
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,166** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-310-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,497.42		ESTIMATED 2024 Taxes: \$ 1,662.21	
Legal Description GEORGETOWN 3RD ADD TOVEY LOTS 1 & 2 BLK 6 & PART OF VACATED ANNIE AVE 100X130 & 25X137' 2001R07378 1987R21570 151350.000 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,535	0	28,435	0	31,970	
	2024	3,483	0	30,683	0	34,166	

Land Fair Cash Val: 10,449 Building Fair Cash Val: 92,049 **Non-Farm Value: 102,498**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	IMPROVEMENT	613
	IMPROVEMENT	5402
2024	OWNER OCCUPD	6000
	IMPROVEMENT	613
	IMPROVEMENT	5402

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/15/2006	\$74,100	2006R00724	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-310-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-310-005-00 800 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAKE JASON M & SARA A

714 CROWDER AVE
PO BOX 51
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,583** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-310-005-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 120.66		ESTIMATED 2024 Taxes: \$ 118.79	
Legal Description GEORGETOWN 3RD ADD TOVEY LOT 14 BLK 6 & PART OF VACATED ANNIE AVE 2002R00665 50X130' & 25X137' 151363.000 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,608	0	0	0	1,608	
	2024	1,583	0	0	0	1,583	

Land Fair Cash Val: 4,749 Building Fair Cash Val: 0 **Non-Farm Value: 4,749**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-310-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-310-006-00 802 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAKE JASON M & SARA A

714 CROWDER AVE
PO BOX 51
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,073** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-310-006-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 81.58		ESTIMATED	2024 Taxes: \$ 80.52	
Legal Description GEORGETOWN 3RD ADD TOVEY LT 13 BLK 6 2002-00665 151362.000 50X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,087	0	0	0	1,087		
	2024	1,073	0	0	0	1,073		

Land Fair Cash Val: 3,219 Building Fair Cash Val: 0 **Non-Farm Value: 3,219**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-310-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-310-007-00 806 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAVIS WILLIAM J

806 CROWDER AVE
PO BOX 112
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,263** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-310-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 466.68	ESTIMATED			2024 Taxes: \$ 545.01
Legal Description GEORGETOWN 3RD ADD TOVEY LTS 11 & 12 BLK 6 96-06407 151360.000 88-883 100X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,854	0	9,365	0	12,219		
	2024	2,813	0	10,450	0	13,263		

Land Fair Cash Val: 8,439 Building Fair Cash Val: 31,350 **Non-Farm Value: 39,789**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1996	\$5,400		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-310-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-310-008-00 812 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HUNT RE TRUST NO 812
%DANIEL W GRANQUIST
UNIT 892
1070 S CALUMET RD
CHESTERTON IN 46304

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,053** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-310-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 804.58	ESTIMATED			2024 Taxes: \$ 904.45
Legal Description GEORGETOWN 3RD ADD TOVEY LOTS 8 9 & 10 BLK 6 99-02088 151357.000 B343 P256 167X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,603	0	5,119	0	10,722		
	2024	5,520	0	6,533	0	12,053		

Land Fair Cash Val: 16,560 Building Fair Cash Val: 19,599 **Non-Farm Value: 36,159**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-310-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-311-001-00 714 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAKE JASON M & SARA A

714 CROWDER AVE
PO BOX 51
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$43,656** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-311-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,761.10	ESTIMATED			2024 Taxes: \$ 2,825.70
Legal Description GEORGETOWN 3RD ADD TOVEY LOTS 6 7 9 10 & 11 BLK 5 & PART OF VACATED ANNIE AVE 2002R00665 100X130' & 25X137' 151334.000 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	8,569	0	34,226	0	42,795		
	2024	8,443	0	35,213	0	43,656		

Land Fair Cash Val: 25,329 Building Fair Cash Val: 105,639 **Non-Farm Value: 130,968**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-311-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-311-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TANNER TRAVIS

801 BORAH AVE
PO BOX 93
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,830** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-311-001-01	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 139.42		ESTIMATED	2024 Taxes: \$ 137.32
Legal Description GEORGETOWN 3RD ADD TOVEY LOT 8 BLK 5 & PART OF VACATED ANNIE AVE 2001R07378 50X130' & 25X137' 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,858	0	0	0	1,858	
	2024	1,830	0	0	0	1,830	

Land Fair Cash Val: 5,490 Building Fair Cash Val: 0 Non-Farm Value: 5,490

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
05/15/2006	\$74,100	2006R00724	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-311-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-311-002-00 707 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GERBER JASON S

707 BORAH AVE
PO BOX 34
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$42,914** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-311-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,935.48	ESTIMATED			2024 Taxes: \$ 2,770.02
Legal Description GEORGETOWN 3RD ADD TOVEY LOTS 4 & 5 BLK 5 151335.000 76-7823 100X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	41,764	0	45,119		
	2024	3,307	0	39,607	0	42,914		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 118,821 **Non-Farm Value: 128,742**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/19/2014	\$104,500	2014R03194	Yes
04/12/2017	\$110,000	2017R01310	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-311-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-311-003-00 701 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DIXON RICHARD

P O BOX
701 BORAH AVE
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$45,329** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-08-311-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,761.48		ESTIMATED 2024 Taxes: \$ 1,075.25	
Legal Description GEORGETOWN 3RD ADD TOVEY LTS 1 2 & 3 BLK 5 2005R05417 1995R02849 150X130' 151334.001 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,032	0	49,442	0	54,474	
	2024	4,960	0	40,369	0	45,329	

Land Fair Cash Val: 14,880 Building Fair Cash Val: 121,107 **Non-Farm Value: 135,987**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	25000
2024	IMPROVEMENT	25000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/03/2005	\$52,000	2005R03174	No
09/21/2005	\$87,900	2005R05417	Yes
07/09/2007	\$98,500	2007R03349	No
05/24/2016	\$22,030	2016R01861	No
06/07/2016	\$47,000	2016R02031	No
12/06/2021	\$136,000	2021R05122	No

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials

_____ \$ _____ \$ _____

Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-311-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-311-004-00 475 JOSEPHINE AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

THOMAS CHARLES E JR

475 JOSEPHINE AVE
PO BOX 116
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,813** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-311-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 769.98	ESTIMATED			2024 Taxes: \$ 769.98
Legal Description GEORGETOWN 3RD ADD TOVEY LTS 14 15 16 BLK 5 151349.000 2004R04645 150X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	19,184	0	24,216		
	2024	4,960	0	19,853	0	24,813		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 59,559 **Non-Farm Value: 74,439**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	2955
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	3552

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/15/2004	\$7,000	2004R07181	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-311-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-311-005-00 708 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRIPPLETT TONY E & SUSAN L

708 CROWDER ST
PO BOX 224
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,220** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-311-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,086.34	ESTIMATED			2024 Taxes: \$ 2,042.58
Legal Description GEORGETOWN 3RD ADD TOVEY LTS 12 & 13 BLK 5 151348.000 B336 P140 100X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	30,448	0	33,803		
	2024	3,307	0	29,913	0	33,220		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 89,739 **Non-Farm Value: 99,660**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/05/2009	\$85,900	2009R01279	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-311-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-312-001-00 JOSEPHINE AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAUBLE ELAINE

Address to send notice if different than shown at left:

PO BOX 191
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$843** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-312-001-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 25.82		ESTIMATED 2024 Taxes: \$ 63.26	
Legal Description GEORGETOWN 3RD ADD TOVEY LTS 3 & 4 BLOCK 4 2000-04297 151320.000 100X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	344	0	0	0	344	
	2024	843	0	0	0	843	

Land Fair Cash Val: 2,529 Building Fair Cash Val: 0 **Non-Farm Value: 2,529**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/17/2005	\$1,500	2005R01480	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-312-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-312-001-01 400 JOSEPHINE AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAUBLE ELAINE

400 JOSEPHINE AVE
PO BOX 191
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,640** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-312-001-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 917.44	ESTIMATED			2024 Taxes: \$ 1,147.58
Legal Description GEORGETOWN 3RD ADD LOTS 5 6 7 & 8 BLOCK 4 2002R08832 151321.000 92-02517 200X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,710	0	12,863	0	18,573		
	2024	6,610	0	15,030	0	21,640		

Land Fair Cash Val: 19,830 Building Fair Cash Val: 45,090 **Non-Farm Value: 64,920**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 347
2024	OWNER OCCUPD IMPROVEMENT	6000 347

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/2002	\$40,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-312-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-312-002-00 601 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF TOVEY

Address to send notice if different than shown at left:

PO BOX 238
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-312-002-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description GEORGETOWN 3RD ADD TOVEY LTS 1 & 2 BLK 4 100X130 91-06312 ST DOC# 79-11-5	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-08-312-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-312-003-00 600 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAGGONER JACK E

Address to send notice if different than shown at left:

PO BOX 158
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,307** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-312-003-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 36.02		ESTIMATED 2024 Taxes: \$ 248.16	
Legal Description GEORGETOWN 3RD ADD TOVEY LTS 15 & 16 BLK 4 100X132 91-06311 2000-01620 ST DOC# 85-11-89	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	480	0	0	0	480	
	2024	3,307	0	0	0	3,307	

Land Fair Cash Val: 9,921 Building Fair Cash Val: 0 **Non-Farm Value: 9,921**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/25/2024	\$8,000	2024R01832	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-312-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-312-004-00 606 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAGGONER JACK E

Address to send notice if different than shown at left:

PO BOX 158
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$843** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-312-004-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 36.02		ESTIMATED 2024 Taxes: \$ 63.26	
Legal Description GEORGETOWN 3RD ADD TOVEY LOTS 13 & 14 BLK 4 151330.000 2000-01620 100X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	480	0	0	0	480	
	2024	843	0	0	0	843	

Land Fair Cash Val: 2,529 Building Fair Cash Val: 0 **Non-Farm Value: 2,529**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/25/2024	\$8,000	2024R01832	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-312-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-312-005-00 610 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAGGONER JACK E

Address to send notice if different than shown at left:

PO BOX 158
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,390** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-312-005-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 35.04		ESTIMATED 2024 Taxes: \$ 179.35	
Legal Description GEORGETOWN 3RD ADD TOVEY LTS 11 & 12 BLK 4 95-5952 151328.000 97-00228 100X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	467	0	0	0	467	
	2024	2,390	0	0	0	2,390	

Land Fair Cash Val: 7,170 Building Fair Cash Val: 0 **Non-Farm Value: 7,170**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/20/2024	\$7,000	2024R01431	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-312-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-312-006-00 450 JOSEPHINE AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAGGONER JACK

PO BOX 158
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,697** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-312-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 100.04	ESTIMATED			2024 Taxes: \$ 1,177.90
Legal Description GEORGETOWN 3RD ADD TOVEY LTS 9 & 10 BLK 4 96-06350 151326.000 90-04814 100X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	13,847	0	17,202		
	2024	3,307	0	18,390	0	21,697		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 55,170 **Non-Farm Value: 65,091**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	10221

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/19/2019	\$16,500	2019R00488	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-312-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-400-001-00 705 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SANDSTONE CREEK LLC

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$37,128** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-400-001-00	Class 0011	Acreage 2.380	Print Date 9/23/2024	2023 Taxes: \$ 2,734.12	ESTIMATED			2024 Taxes: \$ 2,739.50
Legal Description NE PART SE1/4 SW1/4 & NW PART SW1/4 SE1/4 LYING N OF DITCH 150065.001 99-01544	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	1,055	0	36,000	37,055		
	2024	0	1,128	0	36,000	37,128		

15-12-08-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/02/2017	\$67,000	2017R02781	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-400-002-00 TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$1,590 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 4,770 Building Fair Cash Val: 0 Non-Farm Value: 4,770

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-400-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-400-003-00 TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

3D FAMILY FARMS
%JOHN R & DARLA HOLMES

7549 PARKTRACE LN SE
OWENS X RDS AL 35763

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$45,883** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-400-003-00	Class 0021	Acreage 60.400	Print Date 9/23/2024	2023 Taxes: \$ 3,183.10		ESTIMATED	2024 Taxes: \$ 3,385.49
Legal Description PART SW1/4 SE1/4 & N3/4 SE1/4 SE1/4 EX N150' 1999R01544 150065.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	43,140	0	0	43,140	
	2024	0	45,883	0	0	45,883	

15-12-08-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-400-005-00 TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,157** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-400-005-00	Class 0021	Acreage 10.000	Print Date 9/23/2024	2023 Taxes: \$ 567.86		ESTIMATED	2024 Taxes: \$ 601.87
Legal Description S1/4 SE1/4 SE1/4 150067.000 90-02720 85-7905	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	7,696	0	0	7,696	
	2024	0	8,157	0	0	8,157	

15-12-08-400-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/01/2005	\$909,600	2005R06744	No
01/29/2019	\$16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-401-001-00 515 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SOUTH FORK SANITARY DIST
%ROBERT GUDGEL PRES

PO BOX 62
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-401-001-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description GEORGETOWN TOVEY LT 8 BLK 3 50X130 97-03525 151031.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-08-401-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-401-002-00 513 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SOUTH FORK SANITARY DIST

PO BOX 147
TOVEY IL 62570

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$0 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-08-401-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four tick marks for valuation input.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-401-003-00 511 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SOUTH FORK SANITARY DIST
%ROBERT GUDGEL PRES

PO BOX 62
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-401-003-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED 2024 Taxes: \$ 0.00	
Legal Description GEORGETOWN TOVEY LT 6 BLK 3 50X130 97-03525 151029.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-08-401-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-401-005-00 501 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MWAA INC

Address to send notice if different than shown at left:

601 N MAIN ST
ELLSWORTH IL 61737

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$61,737 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 27,843 Building Fair Cash Val: 157,368 Non-Farm Value: 185,211

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes red arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-401-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-401-006-00 500 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NICHOLS BRIAN L

Address to send notice if different than shown at left:

136 13TH ST
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,596** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-401-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 432.16	ESTIMATED			2024 Taxes: \$ 795.12
Legal Description GEORGETOWN TOVEY LOT 16 BLK 3 MHRE 1997R04102 50X130' 151039.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	10,082	0	11,759		
	2024	1,653	0	14,943	0	16,596		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 44,829 **Non-Farm Value: 49,788**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/17/2012	\$28,000	2012R05730	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-401-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-401-007-00 502 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

OWENS PATRICIA S & AARON L

502 MASON ST
PO BOX 117
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,313** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-401-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 838.28	ESTIMATED			2024 Taxes: \$ 923.97
Legal Description GEORGETOWN TOVEY E1/2 LOT 14 & ALL LOT 15 BLK 3 94-03616 151038.000 2000-04950 75X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,514	0	14,657	0	17,171		
	2024	2,480	0	15,833	0	18,313		

Land Fair Cash Val: 7,440 Building Fair Cash Val: 47,499 **Non-Farm Value: 54,939**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1994	\$10,670		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-401-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-401-009-00 506 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EDWARDS ROBERT W

Address to send notice if different than shown at left:

PO BOX 281
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,480** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-401-009-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 188.66		ESTIMATED 2024 Taxes: \$ 186.10	
Legal Description GEORGETOWN TOVEY LOT 13 & W1/2 LOT 14 BLK 3 84-2664 151036.000 95-00285 75X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,514	0	0	0	2,514	
	2024	2,480	0	0	0	2,480	

Land Fair Cash Val: 7,440 Building Fair Cash Val: 0 Non-Farm Value: 7,440

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1984	\$2,000		Yes
06/14/2019	\$2,500	2019R01898	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ____ / ____ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-401-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-401-011-00 510 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EDWARDS ROBERT W

Address to send notice if different than shown at left:

PO BOX 281
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$44,433** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-401-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,857.84	ESTIMATED			2024 Taxes: \$ 1,857.84
Legal Description GEORGETOWN TOVEY LOTS 10 11 & 12 BLK 3 151034.000 97-04477 150X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,283	0	39,251	0	43,534		
	2024	4,960	0	39,473	0	44,433		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 118,419 **Non-Farm Value: 133,299**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	SEN FREEZE	7776
2024	SEN FREEZE	8675

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1997	\$3,000		Yes
07/20/2015	\$8,000	2015R02813	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-401-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-401-012-00 514 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SOUTH FORK SANITARY DIST
%ROBERT GUDGEL PRES

PO BOX 62
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-401-012-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description GEORGETOWN TOVEY LT 9 BLK 3 50X130 97-03525 151032.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-08-401-012-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-402-001-00 421 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PELLINGHELLI MARTHA J & MARIANNA M

Address to send notice if different than shown at left:

PO BOX 241
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,133** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-402-001-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 418.88	ESTIMATED			2024 Taxes: \$ 385.18
Legal Description GEORGETOWN TOVEY W1/2 LT 8 BLK 2 151014.000 88-1652 25X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	894	0	4,688	0	5,582		
	2024	880	0	4,253	0	5,133		

Land Fair Cash Val: 2,640 Building Fair Cash Val: 12,759 **Non-Farm Value: 15,399**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1988	\$1,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-402-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-402-002-00 419 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF TOVEY
%CITY CLERK

PO BOX 238
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-402-002-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description GEORGETOWN TOVEY E1/2 LT 8 BLK 2 CITY GARAGE 25X130 86-18097	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0		
	2024	0	0	0	0	0		

15-12-08-402-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-402-003-00 417 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF TOVEY

Address to send notice if different than shown at left:

PO BOX 238
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-402-003-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description GEORGETOWN TOVEY W1/2 LT 7 BLK 2 25X130 86-18097 ST DOC# 86-11-10	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-08-402-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-402-004-00 415 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF TOVEY

Address to send notice if different than shown at left:

PO BOX 238
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-402-004-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description GEORGETOWN TOVEY LT 6 EX E22.5 & E1/2 LOT 7 BLK 2 47.5X130 86-18463 ST DOC# 86-11-9	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-08-402-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-402-005-00 411 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEWHIRST JERRY K & MARLA R CO TRUSTEI

Address to send notice if different than shown at left:

1212 LAKESIDE LN
MAHOMET

IL 61853

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,860** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-402-005-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,128.82		ESTIMATED		2024 Taxes: \$ 1,040.05
Legal Description GEORGETOWN TOVEY W5 LT 5 & E 22 1/2' LT 6 BLK 2 POST OFFICE 151011.000 27.5X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	981	0	14,062	0	15,043		
	2024	967	0	12,893	0	13,860		

Land Fair Cash Val: 2,901 Building Fair Cash Val: 38,679 **Non-Farm Value: 41,580**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History

Date Sold	Sale Price	Doc#	Qualified?
10/26/2015	\$20,000	2015R04134	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-402-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-402-006-00 409 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLEETON EDWARD A & REBECCA

PO BOX 198
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,317** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-402-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 775.40		ESTIMATED 2024 Taxes: \$ 624.11	
Legal Description GEORGETOWN TOVEY LT 5 EX W5 BLK 2 151010.000 68-186849 45X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,510	0	8,823	0	10,333	
	2024	1,487	0	6,830	0	8,317	

Land Fair Cash Val: 4,461 Building Fair Cash Val: 20,490 **Non-Farm Value: 24,951**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/19/2019	\$24,000	2019R04061	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-402-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-402-007-00 407 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOUVET PHYLLIS J &
JOYCE A BAIRD & PHYLLIS J HARTER

PO BOX 27
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,593** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-402-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 345.48	ESTIMATED			2024 Taxes: \$ 151.28
Legal Description GEORGETOWN TOVEY LT 4 BLK 2 151009.000 B271 P232 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	13,927	0	15,604		
	2024	1,653	0	16,940	0	18,593		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 50,820 **Non-Farm Value: 55,779**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
2024	ELDERLY SEN FREEZE	5000 5577

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/11/2007	\$25,000	2007R02823	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-402-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-402-008-00 405 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOUVET KAREN J & GENE E JR

Address to send notice if different than shown at left:

1819 S MAIN ST
SOUTH JACKSONVILLE IL 62650

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,396** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-402-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,705.74	ESTIMATED			2024 Taxes: \$ 1,905.71
Legal Description GEORGETOWN TOVEY LT 3 BLK 2 151008.000 2000-05438 50X130 12-08-G 91-03659 99-05782	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	21,054	0	22,731		
	2024	1,653	0	23,743	0	25,396		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 71,229 **Non-Farm Value: 76,188**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-402-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-402-009-00 403 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TYLER MICHAEL G & MARK E

403 MIDLAND BLVD
PO BOX 54
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,183** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-402-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 459.62	ESTIMATED			2024 Taxes: \$ 521.53
Legal Description GEORGETOWN TOVEY LT 2 BLK 2 151007.000 88-1434 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	10,448	0	12,125		
	2024	1,653	0	11,530	0	13,183		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 34,590 **Non-Farm Value: 39,549**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD IMPROVEMENT	6000 233

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1988	\$10,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-402-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-402-010-00 125 LYNN AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAVIS AARON E & KATELYNN E

PO BOX
125 LYNN AVE
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$44,329** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-402-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,412.30	ESTIMATED			2024 Taxes: \$ 2,876.20
Legal Description GEORGETOWN TOVEY LT 1 BLK 2 151006.000 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	36,470	0	38,147		
	2024	1,653	0	42,676	0	44,329		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 128,028 **Non-Farm Value: 132,987**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/30/2019	\$93,000	2019R03796	Yes
09/07/2022	\$133,000	2022R03276	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-402-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-402-011-00 400 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREGORY MARC S & MELANIE S

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,013** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-402-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,224.66		ESTIMATED		2024 Taxes: \$ 1,351.69
Legal Description GEORGETOWN TOVEY LT 16 BLK 2 151023.000 2002-04351 50X130 12-08-G 92-1803	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	14,643	0	16,320		
	2024	1,653	0	16,360	0	18,013		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 49,080 **Non-Farm Value: 54,039**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2002	\$47,000		Yes
12/13/2012	\$24,900	2012R06813	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-402-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-402-012-00 404 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MELVIN DORIS A

404 MASON ST
PO BOX 170
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,224** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-402-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 226.62	ESTIMATED			2024 Taxes: \$ 226.62
Legal Description GEORGETOWN TOVEY LOTS 14 & 15 BLK 2 2000R04734 100X130' 151021.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	18,080	0	21,435		
	2024	3,307	0	20,917	0	24,224		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 62,751 **Non-Farm Value: 72,672**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	7415
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	10204

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2000	\$30,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-402-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-402-013-00 406 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ASEBEDO JODIE L

406 MASON ST
PO BOX 106
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,276** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-402-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,283.18	ESTIMATED			2024 Taxes: \$ 1,334.13
Legal Description GEORGETOWN TOVEY LT 13 BLK 2 151020.000 2004R05355 50X130 12-08-G 2004R00199	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	21,423	0	23,100		
	2024	1,653	0	22,623	0	24,276		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 67,869 **Non-Farm Value: 72,828**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD IMPROVEMENT	6000 497

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2004	\$65,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-402-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-402-014-00 408 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WADKINS TIMOTHY L & SHERRI L

Address to send notice if different than shown at left:

PO BOX 28
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,677** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-402-014-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 125.84		ESTIMATED 2024 Taxes: \$ 0.00	
Legal Description GEORGETOWN TOVEY LT 12 BLK 2 2003R00739 151019.000 98-01242 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,677	0	0	0	1,677	
	2024	1,677	0	0	0	1,677	

Land Fair Cash Val: 5,031 Building Fair Cash Val: 0 **Non-Farm Value: 5,031**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-402-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-402-015-00 410 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WADKINS TIMOTHY L & SHERRI L

Address to send notice if different than shown at left:

PO BOX 28
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$51,803** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-402-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,838.98	ESTIMATED			2024 Taxes: \$ 3,437.05
Legal Description GEORGETOWN TOVEY LTS 10 11 & 12 BLK 2 2002-02301 151017.000 79-28203 150X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	40,478	0	43,833		
	2024	4,960	0	46,843	0	51,803		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 140,529 **Non-Farm Value: 155,409**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-402-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-402-016-00 150 CALLAWAY ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WADKINS TIMOTHY L & SHERRI L

Address to send notice if different than shown at left:

PO BOX 28
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,873** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-402-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 136.88		ESTIMATED		2024 Taxes: \$ 140.55
Legal Description GEORGETOWN TOVEY LT 9 BLK 2 MHRE 151016.000 90-04365 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	147	0	1,824		
	2024	1,653	0	220	0	1,873		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 660 **Non-Farm Value: 5,619**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/21/2005	\$5,500	2005R00368	Yes
07/30/2007	\$4,600	2007R03734	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-402-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-403-001-00 315 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BERTOLDO BRIAN II

Address to send notice if different than shown at left:

1550 N 500 EAST RD
PAWNEE IL 62558

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$1,653 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: A REVALUATION OF PROPERTY.

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 4,959 Building Fair Cash Val: 0 Non-Farm Value: 4,959

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow pointing up)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes entry for 08/08/2023.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-403-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-403-002-00 309 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L II

Address to send notice if different than shown at left:

1550 N 500 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,887** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-403-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,088.08		ESTIMATED 2024 Taxes: \$ 1,792.48	
Legal Description GEORGETOWN TOVEY LTS 5 6 & 7 BLK 1 2003R09420 150995.000 70-195490 150X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,032	0	15,468	0	20,500	
	2024	4,960	0	18,927	0	23,887	

Land Fair Cash Val: 14,880 Building Fair Cash Val: 56,781 **Non-Farm Value: 71,661**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/28/2017	\$25,000	2017R03143	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-403-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-403-003-00 307 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L II

Address to send notice if different than shown at left:

1550 N 500 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-403-003-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 125.84		ESTIMATED 2024 Taxes: \$ 124.04	
Legal Description GEORGETOWN TOVEY LT 4 BLK 1 150994.000 88-5657 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,677	0	0	0	1,677	
	2024	1,653	0	0	0	1,653	

Land Fair Cash Val: 4,959 Building Fair Cash Val: 0 **Non-Farm Value: 4,959**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/06/2016	\$4,000	2016R02007	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ____ / ____ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-403-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-403-004-00 305 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L II

Address to send notice if different than shown at left:

1550 N 500 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,646** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-403-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 612.26		ESTIMATED 2024 Taxes: \$ 723.83	
Legal Description GEORGETOWN TOVEY LOT 3 BLK 1 1988R01341 1986R14842 1986R13160 50X130' 150993.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,677	0	6,482	0	8,159	
	2024	1,653	0	7,993	0	9,646	

Land Fair Cash Val: 4,959 Building Fair Cash Val: 23,979 **Non-Farm Value: 28,938**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/27/2012	\$18,000	2012R02293	No
10/20/2015	\$20,000	2015R04047	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-403-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-403-004-01 TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FOSTER THOMAS E

300 MASON ST
PO BOX 127
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,264** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-403-004-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 565.74		ESTIMATED	2024 Taxes: \$ 695.17
Legal Description GEORGETOWN LOTS 1 & 2 BLK 1 100X130'	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,355	0	4,184	0	7,539	
	2024	3,307	0	5,957	0	9,264	

Land Fair Cash Val: 9,921 Building Fair Cash Val: 17,871 **Non-Farm Value: 27,792**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
04/27/2012	\$18,000	2012R02293	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-403-004-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-403-005-00 300 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FOSTER THOMAS E

300 MASON ST
PO BOX 127
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,850** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-403-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description GEORGETOWN TOVEY LTS 15 & 16 BLK 1 151005.000 88-1563 100X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	16,695	0	20,050		
	2024	3,307	0	21,543	0	24,850		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 64,629 **Non-Farm Value: 74,550**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled 70-100% Ve	6000 14050
2024	OWNER OCCUPD Disabled 70-100% Ve	6000 18850

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-403-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-403-006-00 304 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SZABO MARLENE

304 MASON ST
PO BOX 192
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,053** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-403-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description GEORGETOWN TOVEY LT 14 BLK 1 MHRE 151003.000 92-07006 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	4,771	0	6,448		
	2024	1,653	0	5,400	0	7,053		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 16,200 **Non-Farm Value: 21,159**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	5948 500
2024	OWNER OCCUPD ELDERLY SEN FREEZE	6000 1053 0

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-403-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-403-008-00 308 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HANLON MARY DAWN

Address to send notice if different than shown at left:

PO BOX 226
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,540** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-403-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,991.64	ESTIMATED			2024 Taxes: \$ 1,616.43
Legal Description GEORGETOWN TOVEY LOTS 12 & 13 BLK 1 2004R06059 1985R11052 100X130' 151001.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	29,186	0	32,541		
	2024	3,307	0	32,233	0	35,540		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 96,699 **Non-Farm Value: 106,620**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 ELDERLY	0
<u>Tax Year</u> 2024 ELDERLY SEN FREEZE	5000 2999

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-403-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-403-009-00 312 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DITTMAN MARK

Address to send notice if different than shown at left:

312 MASON ST TOVEY

IL 62570

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$38,663 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: ASSESSMENT INCREASED DUE TO REMODELING. MAY QUALIFY FOR IMPROVEMENT EXEMPTION.

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 9,921 Building Fair Cash Val: 106,068 Non-Farm Value: 115,989

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Exemption History, Amount, Tax Year. Shows exemptions for 2023 and 2024.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows sales history from 2000 to 2024.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-403-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-403-010-00 314 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KOHLER CAROLA

Address to send notice if different than shown at left:

PO BOX 166
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,443** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-403-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 219.20		ESTIMATED 2024 Taxes: \$ 783.64	
Legal Description GEORGETOWN TOVEY LOT 9 BLK 1 2002R03459 1999R04928 1997R04204 50X130' 150998.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,677	0	12,244	0	13,921	
	2024	1,653	0	19,790	0	21,443	

Land Fair Cash Val: 4,959 Building Fair Cash Val: 59,370 **Non-Farm Value: 64,329**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2002	\$58,900		Yes
06/09/2006	\$67,000	2006R02849	Yes
11/26/2008	\$35,000	2008R05966	No
08/19/2013	\$38,000	2013R03726	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-403-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-404-001-00 515 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HENLEY HAROLD L & LORI C

Address to send notice if different than shown at left:

PO BOX 204
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,428** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-404-001-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 107.16		ESTIMATED		2024 Taxes: \$ 0.00
Legal Description GEORGETOWN 1ST ADD TOVEY LT 8 BLK 3 151138.000 86-16142 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,428	0	0	0	1,428		
	2024	1,428	0	0	0	1,428		

Land Fair Cash Val: 4,284 Building Fair Cash Val: 0 **Non-Farm Value: 4,284**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-404-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-404-002-00 513 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HENLEY HAROLD L & LORI C

Address to send notice if different than shown at left:

PO BOX 204
TOVEY

IL 62570

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$1,677 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 5,031 Building Fair Cash Val: 0 Non-Farm Value: 5,031

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-404-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-404-003-00 511 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HENLEY HAROLD L

Address to send notice if different than shown at left:

PO BOX 204
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,677** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-404-003-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 125.84	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description GEORGETOWN 1ST ADD TOVEY LT 6 BLK 3 151136.000 85-10818 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	0	0	1,677		
	2024	1,677	0	0	0	1,677		

Land Fair Cash Val: 5,031 Building Fair Cash Val: 0 **Non-Farm Value: 5,031**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1985	\$1,450		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-404-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-404-004-00 509 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HENLEY HAROLD L

509 MASON ST
PO BOX 204
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,777** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-404-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,508.00	ESTIMATED			2024 Taxes: \$ 1,491.64
Legal Description GEORGETOWN 1ST ADD TOVEY W1/2 LT 4 & ALL LT 5,6,7,8 BLK 3 151135.000 82-41709 225X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,514	0	23,582	0	26,096		
	2024	7,437	0	26,340	0	33,777		

Land Fair Cash Val: 22,311 Building Fair Cash Val: 79,020 **Non-Farm Value: 101,331**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	2899

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-404-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-404-005-00 505 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BALLARD DAVID L & MARCELLA L

Address to send notice if different than shown at left:

PO BOX 202
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,804** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-404-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,085.84		ESTIMATED		2024 Taxes: \$ 1,085.83
Legal Description GEORGETOWN 1ST ADD TOVEY W1/2 LOT 2 ALL LOT 3 & E1/2 LOT 4 BLK 3 1995R01751 100X130' 151133.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	27,988	0	31,343		
	2024	3,307	0	25,497	0	28,804		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 76,491 **Non-Farm Value: 86,412**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	
2024	
SEN FREEZE	3334

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-404-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-404-005-00 505 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BALLARD DAVID L & MARCELLA L
%GAYLAA FERRY

2 TRAVER TINE CIR
MILLSTADT IL 62260

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,804** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-404-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,085.84		ESTIMATED	2024 Taxes: \$ 1,085.83
Legal Description GEORGETOWN 1ST ADD TOVEY W1/2 LOT 2 ALL LOT 3 & E1/2 LOT 4 BLK 3 1995R01751 100X130' 151133.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,355	0	27,988	0	31,343	
	2024	3,307	0	25,497	0	28,804	

Land Fair Cash Val: 9,921 Building Fair Cash Val: 76,491 **Non-Farm Value: 86,412**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	
2024	
SEN FREEZE	3334

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-404-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-404-007-00 225 CALLAWAY ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRUNK RAYMOND C JR

225 CALLAWAY ST
PO BOX 114
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,873** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-404-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,443.62	ESTIMATED			2024 Taxes: \$ 1,416.23
Legal Description GEORGETOWN 1ST ADD TOVEY LT 1 & E1/2 LOT 2 BLK 3 2003R00870 151131.000 93-07576 75X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,514	0	22,724	0	25,238		
	2024	2,480	0	22,393	0	24,873		

Land Fair Cash Val: 7,440 Building Fair Cash Val: 67,179 **Non-Farm Value: 74,619**

****Required**** Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/2003	\$63,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-404-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-404-008-00 275 CALLAWAY ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRUNK RAYMOND C JR & CHAYA R

Address to send notice if different than shown at left:

PO BOX 114
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-404-008-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 125.84		ESTIMATED	2024 Taxes: \$ 124.04
Legal Description GEORGETOWN 1ST ADD TOVEY LT 16 BLK 3 151146.000 2003R08857 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,677	0	0	0	1,677	
	2024	1,653	0	0	0	1,653	

Land Fair Cash Val: 4,959 Building Fair Cash Val: 0 **Non-Farm Value: 4,959**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
10/01/2003	\$2,800		Yes
05/27/2005	\$2,500	2005R03057	Yes
06/25/2019	\$2,250	2019R02004	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-404-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-404-009-00 502 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PARISH CLARA E & TINA MORRISSEY

502 LINKINS AVE
PO BOX 13
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,606** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-404-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,243.34		ESTIMATED	2024 Taxes: \$ 1,321.15
Legal Description GEORGETOWN 1ST ADD TOVEY LT 15 BLK 3 151145.000 75-3149 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,677	0	20,892	0	22,569	
	2024	1,653	0	21,953	0	23,606	

Land Fair Cash Val: 4,959 Building Fair Cash Val: 65,859 **Non-Farm Value: 70,818**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-404-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-404-010-00 504 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PARISH CLARA E

502 LINKINS AVE
PO BOX 13
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,343** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-404-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 126.00	ESTIMATED			2024 Taxes: \$ 140.55
Legal Description GEORGETOWN 1ST ADD TOVEY LT 14 BLK 3 99-05049 151144.000 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	472	0	2,149		
	2024	1,653	0	690	0	2,343		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 2,070 **Non-Farm Value: 7,029**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	470
2024	IMPROVEMENT	470

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1999	\$2,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-404-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-404-011-00 506 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HENLEY HAROLD L

509 MASON ST
PO BOX 204
TOVEY

IL 62570

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$7,310 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 9,921 Building Fair Cash Val: 12,009 Non-Farm Value: 21,930

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes sales data from 2009 and 2011.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-404-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-404-013-00 510 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HENLEY STEVEN F

Address to send notice if different than shown at left:

646 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-404-013-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 125.84		ESTIMATED		2024 Taxes: \$ 124.04
Legal Description GEORGETOWN 1ST ADD TOVEY LT 11 BLK 3 151141.000 2004R06639 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	0	0	1,677		
	2024	1,653	0	0	0	1,653		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 0 **Non-Farm Value: 4,959**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-404-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-404-014-00 512 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ENLOW DONALD JR
% DAVID & MARCELLA BALLARD

PO BOX 144
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,553** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-404-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 37.52		ESTIMATED	2024 Taxes: \$ 37.52	
Legal Description GEORGETOWN 1ST ADD TOVEY LTS 9 & 10 BLK 3 MHRE 151139.000 72-2856 100X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,854	0	1,784	0	4,638		
	2024	2,813	0	1,740	0	4,553		

Land Fair Cash Val: 8,439 Building Fair Cash Val: 5,220 **Non-Farm Value: 13,659**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	4138
2024	OWNER OCCUPD	4053

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-404-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-405-001-00 415 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DUCKWORTH MICHAEL K

415 MASON ST
PO BOX 83
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$42,207** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-405-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,503.06	ESTIMATED			2024 Taxes: \$ 1,551.30
Legal Description GEORGETOWN 1ST ADD TOVEY W40' LOT 6 & ALL LOTS 7 & 8 BLK 2 140X130' 151122.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,697	0	28,833	0	33,530		
	2024	4,627	0	37,580	0	42,207		

Land Fair Cash Val: 13,881 Building Fair Cash Val: 112,740 **Non-Farm Value: 126,621**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	Disabled 30-49% Vete	2500
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	Disabled 30-49% Vete	2500
	IMPROVEMENT	8034

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-405-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-405-004-00 407 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GEARY SHELBY K

P O BOX
407 MASON ST
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,827** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-405-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,273.50		ESTIMATED		2024 Taxes: \$ 1,337.73
Legal Description GEORGETOWN 1ST ADD TOVEY LOTS 4 & 5 & E10' LOT 6 BLK 2 BK281 PG563 110X130' 151118.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,693	0	19,278	0	22,971		
	2024	3,637	0	20,190	0	23,827		

Land Fair Cash Val: 10,911 Building Fair Cash Val: 60,570 **Non-Farm Value: 71,481**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/24/2017	\$56,000	2017R02622	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-405-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-405-005-00 405 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOWARD MARK W & DEBRA L

405 MASON ST
PO BOX 14
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$49,317** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-405-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,402.40	ESTIMATED			2024 Taxes: \$ 2,875.30
Legal Description GEORGETOWN 1ST ADD TOVEY LOTS 1 2 & 3 BLK 2 78-22012 151117.000 90-04821 150X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	37,983	0	43,015		
	2024	4,960	0	44,357	0	49,317		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 133,071 **Non-Farm Value: 147,951**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-405-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-405-008-00 400 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TAYLOR JOE & DONNA

Address to send notice if different than shown at left:

1430 OLD POOR ROBIN RD
SYVANIA GA 30467

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-405-008-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 107.16		ESTIMATED 2024 Taxes: \$ 124.04	
Legal Description GEORGETOWN 1ST ADD TOVEY LOT 16 BLK 2 BK215 PG548 50X130' 151130.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,428	0	0	0	1,428	
	2024	1,653	0	0	0	1,653	

Land Fair Cash Val: 4,959 Building Fair Cash Val: 0 **Non-Farm Value: 4,959**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/24/2006	\$7,500	2006R05325	No
11/08/2011	\$9,000	2011R05150	Yes
04/12/2017	\$3,000	2017R01325	Yes
05/11/2021	\$30,000	2021R01923	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-405-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-405-009-00 402 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TAYLOR JOE & DONNA

Address to send notice if different than shown at left:

1430 OLD POOR ROBIN RD
 SYLVANIA GA 30467

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,706** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-405-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,045.30		ESTIMATED		2024 Taxes: \$ 1,328.65
Legal Description GEORGETOWN 1ST ADD TOVEY LT 15 BLK 2 151129.000 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	12,253	0	13,930		
	2024	1,653	0	16,053	0	17,706		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 48,159 **Non-Farm Value: 53,118**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
11/24/2015	\$13,000	2015R04543	Yes
05/11/2021	\$30,000	2021R01923	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-405-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-405-010-00 408 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WRIGHT MICHELLE

408 LINKINS AVE
PO BOX 31
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,500** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-405-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,381.48	ESTIMATED			2024 Taxes: \$ 1,538.32
Legal Description GEORGETOWN 1ST ADD TOVEY LTS 12 13 & 14 BLK 2 90-00228 2003R05125 151126.000 B203 P268 150X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	19,378	0	24,410		
	2024	4,960	0	21,540	0	26,500		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 64,620 **Non-Farm Value: 79,500**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2003	\$50,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-405-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-405-011-00 410 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WRIGHT MICHELLE

Address to send notice if different than shown at left:

PO BOX 31
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-405-011-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 125.84		ESTIMATED 2024 Taxes: \$ 124.04	
Legal Description GEORGETOWN 1ST ADD TOVEY LT 11 BLK 2 151125.000 76-11007 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,677	0	0	0	1,677	
	2024	1,653	0	0	0	1,653	

Land Fair Cash Val: 4,959 Building Fair Cash Val: 0 **Non-Farm Value: 4,959**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/10/2010	\$1,296	2010R04027	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-405-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-405-012-00 412 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WRIGHT MICHELLE

Address to send notice if different than shown at left:

PO BOX 31
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-405-012-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 125.84		ESTIMATED		2024 Taxes: \$ 124.04
Legal Description GEORGETOWN 1ST ADD TOVEY LT 10 BLK 2 151124.000 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	0	0	1,677		
	2024	1,653	0	0	0	1,653		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 0 **Non-Farm Value: 4,959**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
09/10/2010	\$1,296	2010R04027	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-405-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-405-013-00 250 CALLAWAY ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAKE SARA & JASON

Address to send notice if different than shown at left:

PO BOX 51
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,665** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-405-013-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,077.28		ESTIMATED		2024 Taxes: \$ 1,625.74
Legal Description GEORGETOWN 1ST ADD TOVEY LT 9 BLK 2 151123.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
93-7724 50X130 12-08-G	2023	972	0	13,384	0	14,356		
	2024	1,653	0	20,012	0	21,665		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 60,036 **Non-Farm Value: 64,995**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/1993	\$20,000		Yes
05/13/2019	\$35,000	2019R01479	Yes
07/31/2023	\$65,000	2023R02127	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-405-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-406-001-00 315 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROCKMILLER ANTHONY

PO BOX
315 MASON ST
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,664** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-406-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,161.76	ESTIMATED			2024 Taxes: \$ 1,775.74
Legal Description GEORGETOWN 1ST ADD TOVEY LT 8 BLK 1 151097.000 94-5325 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	33,131	0	34,808		
	2024	1,653	0	28,011	0	29,664		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 84,033 **Non-Farm Value: 88,992**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1994	\$25,000		Yes
06/08/2018	\$19,000	2018R01812	No
04/29/2022	\$89,000	2022R01563	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-406-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-406-002-00 313 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCENTIRE MELANIE S
% SHANNON CORSO GIRARD

PO BOX 178
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,304** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-406-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,043.88	ESTIMATED			2024 Taxes: \$ 1,073.37
Legal Description GEORGETOWN 1ST ADD TOVEY W5' LOT 6 & ALL LOT 7 BLK 1 BK221 PG7 55X130' 151096.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,846	0	18,065	0	19,911		
	2024	1,817	0	18,487	0	20,304		

Land Fair Cash Val: 5,451 Building Fair Cash Val: 55,461 **Non-Farm Value: 60,912**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/17/2006	\$58,000	2006R04010	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-406-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-406-003-00 311 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WELLS DAVID G

311 MASON ST
PO BOX 186
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,264** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-406-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description GEORGETOWN 1ST ADD TOVEY E45 LT 6 BLK 1	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
151095.000	2023	1,510	0	11,333	0	12,843		
78-22484 45X130 12-08-G	2024	1,487	0	14,777	0	16,264		

Land Fair Cash Val: 4,461 Building Fair Cash Val: 44,331 **Non-Farm Value: 48,792**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	0
	ELDERLY	5000
	SEN FREEZE	1843
2024	OWNER OCCUPD	6000
	Disabled Person	0
	ELDERLY	5000
	SEN FREEZE	5264

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1978	\$12,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-406-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-406-004-00 309 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARTER DAVID D & PHYLLIS

309 MASON ST
PO BOX 247
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,853** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-406-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 351.26	ESTIMATED			2024 Taxes: \$ 351.26
Legal Description GEORGETOWN 1ST ADD TOVEY LOTS 3,4 & 5 BLK 1 151094.000 75-3092 150X130 12-08-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	18,314	0	23,346		
	2024	4,960	0	21,893	0	26,853		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 65,679 **Non-Farm Value: 80,559**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled Person	2000
	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	5665
2024	Disabled Person	2000
	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	9172

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-406-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-406-006-00 225 HAROLD ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L & VICKIE L

Address to send notice if different than shown at left:

PO BOX 55
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,624** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-406-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 685.86	ESTIMATED			2024 Taxes: \$ 1,322.50
Legal Description GEORGETOWN 1ST ADD TOVEY LOTS 1 & 2 BLK 1 2001-07596 100X130			YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL
151090.000 12-08-G			2023	3,355	0	11,785	0	15,140
			2024	3,307	0	14,317	0	17,624

Land Fair Cash Val: 9,921 Building Fair Cash Val: 42,951 **Non-Farm Value: 52,872**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/06/2007	\$35,000	2007R03853	Yes
04/30/2012	\$36,000	2012R02328	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-406-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-406-007-00 302 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEROZZO AARON WAYNE

302 LINKINS AVE
PO BOX 240
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,180** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-406-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 556.66	ESTIMATED			2024 Taxes: \$ 613.83
Legal Description GEORGETOWN 1ST ADD TOVEY LOTS 15 & 16 BLK 1 90-02737 151113.000 86-17249 100X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	10,063	0	13,418		
	2024	3,307	0	10,873	0	14,180		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 32,619 **Non-Farm Value: 42,540**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/06/2005	\$35,000	2005R02611	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-406-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-406-009-00 306 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GEARY CHARLES & KIMBERLY

306 LINKINS AVE
PO BOX 181
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,610** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-406-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 553.28	ESTIMATED			2024 Taxes: \$ 553.27
Legal Description GEORGETOWN 1ST ADD TOVEY LTS 12 13 & 14 BLK 1 97-04469 151101.000 90-01143 150X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	20,036	0	25,068		
	2024	4,960	0	21,650	0	26,610		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 64,950 **Non-Farm Value: 79,830**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled Person	2000
	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	4695
2024	Disabled Person	2000
	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	6237

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1997	\$50,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-406-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-406-010-00 310 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CODY MARJORIE A

Address to send notice if different than shown at left:

310 LINKINS AVE
TOVEY IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,996** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-406-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 298.88		ESTIMATED		2024 Taxes: \$ 298.88
Legal Description GEORGETOWN 1ST ADD TOVEY LT 11 BLK 1 2005R03792 1970R194806 50X130' 151100.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	19,816	0	21,493		
	2024	1,653	0	20,343	0	21,996		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 61,029 **Non-Farm Value: 65,988**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY SEN FREEZE	5000 6510
2024	ELDERLY SEN FREEZE	5000 7013

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/29/2011	\$56,000	2011R03776	No
12/03/2013	\$56,000	2013R05329	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-406-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-406-011-00 312 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FLEMING ROBERT J

312 LINKINS AVE
PO BOX 248
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,853** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-406-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 184.16	ESTIMATED			2024 Taxes: \$ 184.15
Legal Description GEORGETOWN 1ST ADD TOVEY LT 10 BLK 1 151099.000 2004R03011 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	13,647	0	15,324		
	2024	1,653	0	16,200	0	17,853		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 48,600 **Non-Farm Value: 53,559**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	1870
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	4399

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2004	\$35,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-406-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-406-012-00 314 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BIALAS ED D

314 LINKINS AVE
PO BOX 217
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,760** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-406-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description GEORGETOWN 1ST ADD TOVEY LT 9 BLK 1	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
151098.000	2023	1,677	0	11,593	0	13,270		
93-00778 50X130 12-08-G	2024	1,653	0	12,107	0	13,760		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 36,321 **Non-Farm Value: 41,280**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	2270
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	2760

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-406-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-407-001-00 511 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BALLARD DANIEL PAUL

Address to send notice if different than shown at left:

PO BOX 105
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,020** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-407-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 633.80	ESTIMATED			2024 Taxes: \$ 376.70
Legal Description GEORGETOWN 2ND ADD TOVEY LOTS 5 6 7 & 8 BLK 3 1976R11217 200X130' 151229.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,209	0	3,237	0	8,446		
	2024	5,133	0	5,887	0	11,020		

Land Fair Cash Val: 15,399 Building Fair Cash Val: 17,661 **Non-Farm Value: 33,060**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	0
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/05/2022	\$15,000	2022R01644	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-407-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-407-002-00 507 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GUDGEL JOSEPH A &
JOHN D DOUGLAS

PO BOX 43
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,216** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-407-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,417.96		ESTIMATED		2024 Taxes: \$ 1,817.16
Legal Description GEORGETOWN 2ND ADD TOVEY LOT 4 BLK 3 1998R06951 1987R19730 50X130' 151227.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	17,219	0	18,896		
	2024	1,653	0	22,563	0	24,216		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 67,689 **Non-Farm Value: 72,648**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-407-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-407-003-00 505 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO JAMES R

505 LINKINS AVE
PO BOX 21
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,736** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-407-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 982.50		ESTIMATED 2024 Taxes: \$ 1,180.83	
Legal Description GEORGETOWN 2ND ADD TOVEY LOT 3 BLK 3 50X130' 151226.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,677	0	17,416	0	19,093	
	2024	1,653	0	20,083	0	21,736	

Land Fair Cash Val: 4,959 Building Fair Cash Val: 60,249 **Non-Farm Value: 65,208**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-407-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-407-004-00 501 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

POP JOSEPH V & JENNIFER GOESCHEL

501 LINKINS AVE
PO BOX 11
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$45,907** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-407-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,943.66		ESTIMATED		2024 Taxes: \$ 2,994.61
Legal Description GEORGETOWN 2ND ADD TOVEY LOTS 1 & 2 BLK 3 1996R02472 BK214 PG400 100X130' 151224.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	41,873	0	45,228		
	2024	3,307	0	42,600	0	45,907		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 127,800 **Non-Farm Value: 137,721**

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History

Tax Year		Amount
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History

Date Sold	Sale Price	Doc#	Qualified?
12/23/2004	\$64,000	200408018	No
08/19/2013	\$110,000	2013R03732	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-407-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-407-005-00 502 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FLANIGAN KEITH A

Address to send notice if different than shown at left:

PO BOX 108
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,414** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-407-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,105.94		ESTIMATED	2024 Taxes: \$ 1,081.62	
Legal Description GEORGETOWN 2ND ADD TOVEY LOTS 15 & 16 BLK 3 1985R11045 100X130' 151238.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	17,383	0	20,738		
	2024	3,307	0	22,107	0	25,414		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 66,321 **Non-Farm Value: 76,242**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-407-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-407-007-00 508 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NIEHAUS CASSIE M

Address to send notice if different than shown at left:

PO BOX 36
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,163** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-407-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 837.00	ESTIMATED			2024 Taxes: \$ 1,032.92
Legal Description GEORGETOWN 2ND ADD TOVEY LOTS 12 13 & 14 BLK 3 1999R00831 1991R05826 150X130' 151235.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	12,520	0	17,552		
	2024	4,960	0	15,203	0	20,163		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 45,609 **Non-Farm Value: 60,489**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 398
2024	OWNER OCCUPD IMPROVEMENT	6000 398

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1979	\$20,700		Yes
01/25/2013	\$40,000	2013R00355	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-407-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-407-008-00 510 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROWN RHONDA L & JOHN L SR

510 BORAH AVE
PO BOX 156
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,810** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-407-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,270.42	ESTIMATED			2024 Taxes: \$ 1,411.50
Legal Description GEORGETOWN 2ND ADD TOVEY LOTS 10 & 11 BLK 3 1995R05927 1993R06669 100X130' 151234.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	19,575	0	22,930		
	2024	3,307	0	21,503	0	24,810		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 64,509 **Non-Farm Value: 74,430**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1995	\$45,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-407-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-407-009-00 350 CAVATORTA AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROWN RHONDA L & JOHN L SR

510 BORAH AVE
PO BOX 156
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,710** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-407-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 213.26		ESTIMATED		2024 Taxes: \$ 203.36
Legal Description GEORGETOWN 2ND ADD TOVEY LOT 9 BLK 3 2004R00912 50X130' 151232.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	1,165	0	2,842		
	2024	1,653	0	1,057	0	2,710		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 3,171 **Non-Farm Value: 8,130**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-407-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-408-001-00 415 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WILBUR BRIAN L & CHRISTINA M

415 LINKINS AVE
PO BOX 221
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,206** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-408-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 756.04	ESTIMATED			2024 Taxes: \$ 915.94
Legal Description GEORGETOWN 2ND ADD TOVEY LT 8 BLK 2 92-6783 151215.000 78-21024 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	14,398	0	16,075		
	2024	1,653	0	16,553	0	18,206		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 49,659 **Non-Farm Value: 54,618**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/02/2007	\$42,000	2007R00963	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-408-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-408-002-00 413 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HENLEY MATHEW

Address to send notice if different than shown at left:

PO BOX 194
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,214** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-408-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,845.68	ESTIMATED			2024 Taxes: \$ 1,892.05
Legal Description GEORGETOWN 2ND ADD TOVEY LTS 6 & 7 BLK 2 2003R03699 151214.000 84-2004 100X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,269	0	27,327	0	30,596		
	2024	3,307	0	27,907	0	31,214		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 83,721 **Non-Farm Value: 93,642**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1984	\$35,550		Yes
07/02/2020	\$88,000	2020R02385	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-408-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-408-003-00 409 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WOLFE CHARLES PHILIP

563 E 2100 NORTH RD
EDINBURG IL 62531

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,064** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-408-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 118.56	ESTIMATED			2024 Taxes: \$ 1,130.40
Legal Description GEORGETOWN 2ND ADD TOVEY LTS 4 & 5 BLK 2 151212.000 77-18308 100X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	10,973	0	14,328		
	2024	3,307	0	11,757	0	15,064		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 35,271 **Non-Farm Value: 45,192**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023	
ELDERLY	5000
SEN FREEZE	1748
Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/02/2005	\$33,000	2005R04339	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-408-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-408-004-00 405 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRIPPLETT TONY E

Address to send notice if different than shown at left:

PO BOX 224
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,413** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-408-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,036.00		ESTIMATED		2024 Taxes: \$ 1,231.63
Legal Description GEORGETOWN 2ND ADD TOVEY LT 3 BLK 2 151210.000 93-04305 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	12,129	0	13,806		
	2024	1,653	0	14,760	0	16,413		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 44,280 **Non-Farm Value: 49,239**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
07/01/1993	\$19,500		Yes
12/30/2009	\$7,500	2009R07149	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-408-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-408-005-00 403 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DARNELL JOHN J

Address to send notice if different than shown at left:

PO BOX 163
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,070** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-408-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 50.74		ESTIMATED 2024 Taxes: \$ 80.29	
Legal Description GEORGETOWN 2ND ADD TOVEY LT 2 BLK 2 MHRE 151209.000 2004R05504 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	517	0	159	0	676	
	2024	913	0	157	0	1,070	

Land Fair Cash Val: 2,739 Building Fair Cash Val: 471 **Non-Farm Value: 3,210**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1985	\$1,000		Yes
11/08/2019	\$3,000	2019R03954	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-408-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-408-006-00 401 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WRIGHT OLA

PO BOX 264
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,373** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-408-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 208.32		ESTIMATED 2024 Taxes: \$ 253.11	
Legal Description GEORGETOWN 2ND ADD TOVEY LT 1 BLK 2 151208.000 93-03269 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,634	0	1,142	0	2,776	
	2024	1,653	0	1,720	0	3,373	

Land Fair Cash Val: 4,959 Building Fair Cash Val: 5,160 **Non-Farm Value: 10,119**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1993	\$12,000	2018R00395	No
02/05/2018	\$0	2018R00395	No
12/16/2019	\$2,100	2019R04402	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-408-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-408-007-00 400 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROWN BRYAN K II

Address to send notice if different than shown at left:

7550 MINDER RD
ROCHESTER IL 62563

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,373** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: A REVALUATION OF PROPERTY.

Parcel Number 15-12-08-408-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 905.36	ESTIMATED			2024 Taxes: \$ 778.39
Legal Description GEORGETOWN 2ND ADD TOVEY LT 16 BLK 2 2000-05315 151223.000 B336 P374 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,632	0	10,433	0	12,065		
	2024	1,653	0	8,720	0	10,373		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 26,160 **Non-Farm Value: 31,119**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Exemption History **Amount**
Tax Year

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
09/01/2000	\$30,000		Yes
01/06/2006	\$28,378	2006R00072	No
07/13/2006	\$10,500	2006R03378	No
06/27/2007	\$41,200	2007R03192	No
03/12/2010	\$45,000	2010R00951	Yes
11/15/2022	\$100	2022R04149	No
06/20/2023	\$14,000	2023R01684	No

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials

_____ \$ _____ \$ _____

Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-408-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-408-008-00 402 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HUBERT JEFFREY & STACEY &
BRADY HUBERT

PO BOX 177
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,440** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for IMPROVEMENT ADDED
Change:

Parcel Number 15-12-08-408-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,421.48		ESTIMATED		2024 Taxes: \$ 1,909.01
Legal Description GEORGETOWN 2ND ADD TOVEY LTS 13 14 & 15 BLK 2 151222.000 74-14536 150X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	13,911	0	18,943		
	2024	4,960	0	20,480	0	25,440		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 61,440 **Non-Farm Value: 76,320**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-408-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-408-010-00 410 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HANSON LORI

410 BORAH AVE
PO BOX 171
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$36,394** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-408-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,194.76		ESTIMATED	2024 Taxes: \$ 2,280.76	
Legal Description GEORGETOWN 2ND ADD TOVEY LTS 11 & 12 BLK 2 151217.000 2004R04729 100X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	31,893	0	35,248		
	2024	3,307	0	33,087	0	36,394		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 99,261 **Non-Farm Value: 109,182**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-408-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-408-012-00 414 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

POP JOSEPH E & DEBORAH A

Address to send notice if different than shown at left:

PO BOX 61
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,714** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-408-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 282.52		ESTIMATED 2024 Taxes: \$ 278.70	
Legal Description GEORGETOWN 2ND ADD TOVEY LTS 9 & 10 BLK 2 151216.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
72-5286 100X130 12-08-G	2023	3,355	0	410	0	3,765	
	2024	3,307	0	407	0	3,714	

Land Fair Cash Val: 9,921 Building Fair Cash Val: 1,221 **Non-Farm Value: 11,142**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-408-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-409-001-00 315 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

WATTS JUSTIN MICHAEL

Address to send notice if different than shown at left:

PO BOX 253
TOVEY

IL 62570

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$35,917 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: IMPROVEMENT ADDED, MAY QUALIFY FOR AN IMPROVEMENT EXEMPTION. CHECK WITH BOARD OF REVIEW.

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024 valuations.

Land Fair Cash Val: 9,921 Building Fair Cash Val: 97,830 Non-Farm Value: 107,751

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Tax Year, Exemption History, Amount. Shows exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows sales history for 2002, 2007, and 2021.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Includes fields for dollar amounts and initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-409-001-00 (vertical text)

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-409-002-00 309 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCLAUGHLIN KRISTIN

Address to send notice if different than shown at left:

PO BOX 235
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,257** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change: IMPROVEMENT ADDED, MAY QUALIFY FOR AN IMPROVEMENT EXEMPTION. CHECK WITH BOARD OF REVIEW.

Parcel Number 15-12-08-409-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,398.72	ESTIMATED			2024 Taxes: \$ 2,058.12
Legal Description GEORGETOWN 2ND ADD TOVEY LTS 5 & 6 BLK 1 151197.000 B21 P26 100X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	35,984	0	39,339		
	2024	3,307	0	30,950	0	34,257		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 92,850 **Non-Farm Value: 102,771**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 1373
2024	OWNER OCCUPD IMPROVEMENT IMPROVEMENT	6000 330 500

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/25/2020	\$5,000	2020R00662	No
12/03/2020	\$24,000	2020R04834	No
10/25/2021	\$100,000	2021R04528	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-409-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-409-003-00 305 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAITE JO ANN M

305 LINKINS AVE
PO BOX 155
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,364** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-409-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,159.36		ESTIMATED	2024 Taxes: \$ 1,159.36
Legal Description GEORGETOWN 2ND ADD TOVEY W41' LOT 3 & ALL LOT 4 BLK 1 91X130' 1979R28615 151196.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,053	0	31,539	0	34,592	
	2024	3,007	0	32,357	0	35,364	

Land Fair Cash Val: 9,021 Building Fair Cash Val: 97,071 **Non-Farm Value: 106,092**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	8142
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	8914

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/26/2007	\$42,500	2007R03670	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-409-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-409-004-00 303 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L II

Address to send notice if different than shown at left:

1550 N 500 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,500** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-08-409-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 196.16		ESTIMATED 2024 Taxes: \$ 1,238.16	
Legal Description GEORGETOWN 2ND ADD TOVEY LOT 2 & E9' LOT 3BLK 1 1986R17039 59X130' 151194.000 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,982	0	6,632	0	8,614	
	2024	1,950	0	14,550	0	16,500	

Land Fair Cash Val: 5,850 Building Fair Cash Val: 43,650 **Non-Farm Value: 49,500**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
Tax Year 2023 Leasehold Owner	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/26/2007	\$42,500	2007R03670	No
02/02/2015	\$29,900	2015R00383	No
12/08/2017	\$21,000	2017R04402	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-409-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-409-005-00 301 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCOTT ROBERT H

Address to send notice if different than shown at left:

1703 E 1500 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,856** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-409-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 554.32		ESTIMATED 2024 Taxes: \$ 589.51	
Legal Description GEORGETOWN 2ND ADD TOVEY LT 1 BLK 1 151193.000 73-9025 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,677	0	5,710	0	7,387	
	2024	1,653	0	6,203	0	7,856	

Land Fair Cash Val: 4,959 Building Fair Cash Val: 18,609 **Non-Farm Value: 23,568**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/18/2005	\$20,000	2005R00977	Yes
02/04/2013	\$16,000	2012R00548	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-409-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-409-006-00 300 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HUNDLEY JEANNIE M

Address to send notice if different than shown at left:

300 BORAH AVE
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$41,693** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-409-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 960.96	ESTIMATED			2024 Taxes: \$ 2,678.40
Legal Description GEORGETOWN 2ND ADD TOVEY LT 16 BLK 1 151207.000 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	17,129	0	18,806		
	2024	1,653	0	40,040	0	41,693		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 120,120 **Non-Farm Value: 125,079**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/16/2021	\$50,000	2021R03947	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-409-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-409-007-00 302 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WISE BETTY

302 BORAH AVE
PO BOX 131
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,816** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-409-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description GEORGETOWN 2ND ADD TOVEY LT 15 BLK 1	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
151206.000 50X130 12-08-G	2023	1,677	0	20,665	0	22,342		
	2024	1,653	0	22,163	0	23,816		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 66,489 **Non-Farm Value: 71,448**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	11342
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	12816

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-409-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-409-008-00 304 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GUDGEL EUGENE F JR
% MELISSA & DAVID CAPPELLIN

PO BOX 662
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,307** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-409-008-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 251.76	ESTIMATED			2024 Taxes: \$ 248.16
Legal Description GEORGETOWN 2ND ADD TOVEY LOTS 13 & 14 BLK 1 151205.000 100X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	0	0	3,355		
	2024	3,307	0	0	0	3,307		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 0 **Non-Farm Value: 9,921**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-409-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-409-009-00 308 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VOLLINTINE PEGGY J

P O BOX
308 BORAH AVE
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,120** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-409-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 161.80	ESTIMATED			2024 Taxes: \$ 234.12
Legal Description GEORGETOWN 2ND ADD TOVEY LT 12 BLK 1 CFD 92 96-05654 151203.000 82-43856 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	8,479	0	10,156		
	2024	1,653	0	9,467	0	11,120		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 28,401 **Non-Farm Value: 33,360**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled Person	2000
2024	Disabled Person	2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/29/2010	\$24,500	2010R02720	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-409-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-409-010-00 310 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CHRISTER ROBERT M

Address to send notice if different than shown at left:

PO BOX 153
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,133** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-409-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 876.24	ESTIMATED			2024 Taxes: \$ 985.50
Legal Description GEORGETOWN 2ND ADD TOVEY LT 11 BLK 1 99-06066 151202.000 94-6113 50X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	18,000	0	19,677		
	2024	1,653	0	19,480	0	21,133		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 58,440 **Non-Farm Value: 63,399**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled Person	2000
2024	Disabled Person	2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/15/2010	\$25,000	2010R05327	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-409-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-409-011-00 312 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLEETON EDWARD & REBECCA

Address to send notice if different than shown at left:

PO BOX 198
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,790** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-409-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,202.30	ESTIMATED			2024 Taxes: \$ 1,259.92
Legal Description GEORGETOWN 2ND ADD TOVEY LTS 9 & 10 BLK 1 2002-03807 151200.000 2002-01682 100X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	12,667	0	16,022		
	2024	3,307	0	13,483	0	16,790		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 40,449 **Non-Farm Value: 50,370**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2002	\$24,900		Yes
09/07/2006	\$26,500	2006R04365	Yes
04/09/2014	\$41,500	2014R01228	Yes
07/01/2015	\$41,500	2015R02535	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-409-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-410-001-00 425 CALLAWAY ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF TOVEY

Address to send notice if different than shown at left:

PO BOX 238
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-410-001-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED 2024 Taxes: \$ 0.00	
Legal Description GEORGETOWN 3RD ADD TOVEY W13.18' LOT 4 & ALL LOTS 5 THRU 12 & PART LOTS 13 14 15 & 16 BLK 3 BK149 PG513 BK150 PG51-56	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-08-410-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-410-001-01 CALLAWAY ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF TOVEY

Address to send notice if different than shown at left:

PO BOX 20
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$134** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-410-001-01	Class 0060	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description GEORGETOWN 3RD ADD TOVEY S155.68' W186.82' N155.68' E186.82' 2004R05390 1991R06311 155X186' 151317.002 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	133	0	1	0	134		
	2024	133	0	1	0	134		

Land Fair Cash Val: 399 Building Fair Cash Val: 3 **Non-Farm Value: 402**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/22/2004	\$10,000	2004R07987	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-410-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-410-001-02 TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RYAN LLC

STE 1500
1233 WEST LOOP S
HOUSTON TX 77027

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,796** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: A REVALUATION OF PROPERTY.

Parcel Number 15-12-08-410-001-02	Class 0060	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,296.46	ESTIMATED			2024 Taxes: \$ 1,335.41
Legal Description CELL TOWER GROUND 50X50	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	664	0	16,613	0	17,277		
	2024	685	0	17,111	0	17,796		

Land Fair Cash Val: 2,055 Building Fair Cash Val: 51,333 **Non-Farm Value: 53,388**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/09/2016	\$265,638	2016R02896	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-410-001-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-411-001-00 413 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RIVA AMY S

Address to send notice if different than shown at left:

PO BOX 180
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$37,540** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-411-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,983.54		ESTIMATED	2024 Taxes: \$ 2,366.76
Legal Description GEORGETOWN 3RD ADD TOVEY LOTS 7 & 8 BLK 2 2001-03439 151308.000 91-04507 100X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,355	0	29,078	0	32,433	
	2024	3,307	0	34,233	0	37,540	

Land Fair Cash Val: 9,921 Building Fair Cash Val: 102,699 **Non-Farm Value: 112,620**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1984	\$19,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-411-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-411-002-00 411 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

POP JOSEPH E & DEBORAH A (LSR)
FOR JOSEPH J POP (LSE)

PO BOX 61
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,234** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-411-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 454.60		ESTIMATED 2024 Taxes: \$ 767.96	
Legal Description GEORGETOWN 3RD ADD TOVEY LTS 5 & 6 BLK 2 2004R03386 151307.000 97-03028 100X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,355	0	8,703	0	12,058	
	2024	3,307	0	12,927	0	16,234	

Land Fair Cash Val: 9,921 Building Fair Cash Val: 38,781 **Non-Farm Value: 48,702**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000
2024	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/28/2013	\$30,000	2013R03907	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-411-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-411-003-00 405 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

POP JOSEPH V

Address to send notice if different than shown at left:

PO BOX 11
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,867** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-411-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 297.92		ESTIMATED		2024 Taxes: \$ 290.18
Legal Description GEORGETOWN 3RD ADD TOVEY LTS 3 & 4 BLK 2 151304.000 98-04704 100X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	615	0	3,970		
	2024	3,307	0	560	0	3,867		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 1,680 **Non-Farm Value: 11,601**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
07/01/1998	\$17,800		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-411-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-411-004-00 TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF TOVEY
% CITY CLERK

PO BOX 238
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-411-004-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description GEORGETOWN 3RD ADD TOVEY LTS 1 & 2 & LTS 9 THRU 16 BLK 2 LYNN PARK CITY PARK 100X130	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0		
	2024	0	0	0	0	0		

15-12-08-411-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-412-001-00 400 LYNN AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CORSO DEBRA ANN & KEVIN L

313 BORAH AVE
PO BOX 169
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,960** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-412-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,008.08	ESTIMATED			2024 Taxes: \$ 1,008.08
Legal Description GEORGETOWN 3RD ADD TOVEY LTS 7 & 8 BLK 1	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
151292.000	2023	3,355	0	26,712	0	30,067		
91-00649 100X130 12-08-G	2024	3,307	0	30,653	0	33,960		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 91,959 **Non-Farm Value: 101,880**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	5633
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	9526

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-412-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-412-002-00 307 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

GUDGEL JOSEPH A

Address to send notice if different than shown at left:

PO BOX 43
TOVEY

IL 62570

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$66,533 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 19,830 Building Fair Cash Val: 179,769 Non-Farm Value: 199,599

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount. Rows for Tax Year 2023 and 2024, both showing OWNER OCCUPD with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-412-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-412-003-00 301 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RORA MICHAEL F & RITA LYNN

301 BORAH AVE
PO BOX 200
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,990** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-08-412-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 55.76	ESTIMATED			2024 Taxes: \$ 55.75
Legal Description GEORGETOWN 3RD ADD TOVEY LOTS 1 & 2 BLK 1	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
95-3424 151286.000	2023	3,355	0	13,684	0	17,039		
92-0884 100X130 12-08-G	2024	3,307	0	15,683	0	18,990		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 47,049 **Non-Farm Value: 56,970**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
	SEN FREEZE	3296
2024	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
	SEN FREEZE	5247

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1992	\$30,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-412-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-412-004-00 300 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WILSON ROBERT E

300 CROWDER AVE
PO BOX 141
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,377** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-412-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 303.16	ESTIMATED			2024 Taxes: \$ 303.16
Legal Description GEORGETOWN 3RD ADD TOVEY LTS 15 & 16 BLK 1 91-03478 151301.000 99-05214 100X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	27,548	0	30,903		
	2024	3,307	0	30,070	0	33,377		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 90,210 **Non-Farm Value: 100,131**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	15863
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	18337

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1999	\$69,900		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-412-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-412-005-00 304 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCALLIONS BRIAN D &
BERNADETTE T LYONS

PO BOX 210
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,064** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-412-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,843.96		ESTIMATED		2024 Taxes: \$ 1,805.76
Legal Description GEORGETOWN 3RD ADD TOVEY LOTS 13 & 14 BLK 1 MHRE 151298.000 2004R01901 100X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	29,218	0	32,573		
	2024	3,307	0	28,757	0	32,064		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 86,271 **Non-Farm Value: 96,192**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled Person	6000 2000
2024	OWNER OCCUPD Disabled Person	6000 2000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/2004	\$10,000		No
02/18/2015	\$74,900	2015R00596	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-412-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-412-006-00 308 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SUMMERS SHANE M & CHRISTY

308 CROWDER AVE
PO BOX 81
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,844** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-412-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,052.56	ESTIMATED			2024 Taxes: \$ 2,014.37
Legal Description GEORGETOWN 3RD ADD TOVEY LOTS 11 & 12 BLK 1 93-03681 151297.000 99-01681 100X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	29,998	0	33,353		
	2024	3,307	0	29,537	0	32,844		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 88,611 **Non-Farm Value: 98,532**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1999	\$55,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-412-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-412-007-00 350 LYNN AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ZANOTTI MICHAEL R & RAECQUEL L

350 LYNN AVE
PO BOX 227
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,067** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-412-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,686.98	ESTIMATED			2024 Taxes: \$ 2,181.18
Legal Description GEORGETOWN 3RD ADD TOVEY LTS 9 & 10 BLK 1 151294.000 75-3176 100X130 12-08-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	27,954	0	31,309		
	2024	3,307	0	31,760	0	35,067		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 95,280 **Non-Farm Value: 105,201**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 2828
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/02/2014	\$33,000	2014R01130	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-412-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-413-001-00 221 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PELLINGHELLI MARIANNA M

221 MIDLAND BLVD
PO BOX 241
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,167** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-413-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 422.70		ESTIMATED 2024 Taxes: \$ 2,413.81	
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 10 11 12 & 13 BLK 2 151398.000 78-22739 200X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	6,711	0	24,004	0	30,715	
	2024	6,610	0	31,557	0	38,167	

Land Fair Cash Val: 19,830 Building Fair Cash Val: 94,671 **Non-Farm Value: 114,501**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	14082
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-413-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-413-002-00 217 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MINK BILLY L

Address to send notice if different than shown at left:

PO BOX 215
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,310** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-413-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 714.08	ESTIMATED			2024 Taxes: \$ 1,073.82
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 7 8 & 9 BLK 2 MHRE 151396.000 69-192600 150X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	10,484	0	15,516		
	2024	4,960	0	15,350	0	20,310		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 46,050 **Non-Farm Value: 60,930**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/11/2020	\$5,000	2020R00479	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-413-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-413-003-00 215 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLEETON EDWARD A & REBECCA J

Address to send notice if different than shown at left:

PO BOX 198
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,957** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-413-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,218.88		ESTIMATED		2024 Taxes: \$ 1,497.57
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 5 & 6 BLK 2 MHRE 151392.000 95-3440 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	12,888	0	16,243		
	2024	3,307	0	16,650	0	19,957		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 49,950 **Non-Farm Value: 59,871**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
07/01/1995	\$54,000	1995R03440	Yes
01/16/2014	\$5,394	2014R00173	No
02/06/2014	\$15,000	2014R00444	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-413-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-413-004-00 205 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CROWDER CHRISTIAN E

PO BOX 56
205 MIDLAND BLVD
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$59,661** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: ASSESSMENT INCREASED DUE TO REMODELING.

Parcel Number 15-12-08-413-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED 2024 Taxes: \$ 0.00	
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 3 & 4 BLK 2 1998R01563 1993R04804 100X130' 151390.000 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,355	0	64,946	0	68,301	
	2024	3,307	0	56,354	0	59,661	

Land Fair Cash Val: 9,921 Building Fair Cash Val: 169,062 **Non-Farm Value: 178,983**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled 70-100% Ve	6000 62301
2024	OWNER OCCUPD Disabled 70-100% Ve	6000 53661

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2007	\$95,000	2007R03789	Yes
06/30/2014	\$87,000	2014R02409	Yes
02/15/2022	\$60,000	2022R00578	No
10/18/2022	\$179,000	2022R03778	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-413-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-413-005-00 201 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PERONA MICHAEL JOSEPH

201 MIDLAND BLVD
PO BOX 41
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,650** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-413-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 743.64	ESTIMATED			2024 Taxes: \$ 368.45
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 1 & 2 BLK 2 2004R02787 151388.000 B281/P383 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	12,555	0	15,910		
	2024	3,307	0	17,343	0	20,650		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 52,029 **Non-Farm Value: 61,950**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	4740

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-413-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-413-006-00 200 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PICKINPAUGH JERALD G

200 MASON ST
PO BOX 143
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,303** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-413-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,969.42		ESTIMATED	2024 Taxes: \$ 2,198.89	
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 24 25 & 26 BLK 2 151413.000 97-06766 150X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	32,213	0	37,245		
	2024	4,960	0	35,343	0	40,303		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 106,029 **Non-Farm Value: 120,909**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-413-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-413-007-00 206 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GRAHAM DONALD

206 MASON ST
PO BOX 151
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,107** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-413-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 623.52		ESTIMATED	2024 Taxes: \$ 623.51
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 21 22 & 23 BLK 2 151410.000 150X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,032	0	14,277	0	19,309	
	2024	4,960	0	17,147	0	22,107	

Land Fair Cash Val: 14,880 Building Fair Cash Val: 51,441 **Non-Farm Value: 66,321**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY SEN FREEZE	6000 5000 2798

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-413-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-413-009-00 212 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BEST JERRY L

216 MASON ST
PO BOX 183
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-413-009-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 125.84		ESTIMATED	2024 Taxes: \$ 124.04	
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LT 20 BLK 2 151407.000 85-11620 50X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	0	0	1,677		
	2024	1,653	0	0	0	1,653		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 0 **Non-Farm Value: 4,959**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-413-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-413-010-00 216 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BEST JEAN & JERRY L

216 MASON ST
PO BOX 183
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,437** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-413-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 851.48	ESTIMATED			2024 Taxes: \$ 1,008.31
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 18 & 19 BLK 2 151406.000 85-11620 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	18,992	0	22,347		
	2024	3,307	0	21,130	0	24,437		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 63,390 **Non-Farm Value: 73,311**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-413-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-413-011-00 220 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WINGO ROSALEE

P O BOX
220 MASON ST
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,380** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-413-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 626.96		ESTIMATED 2024 Taxes: \$ 703.87	
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 16 & 17 BLK 2 151403.000 B226 P167 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,355	0	11,000	0	14,355	
	2024	3,307	0	12,073	0	15,380	

Land Fair Cash Val: 9,921 Building Fair Cash Val: 36,219 **Non-Farm Value: 46,140**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/20/2017	\$35,000	2017R02232	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-413-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-413-012-00 222 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HAYTER VIRGILYN K

222 MASON ST
PO BOX 209
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,486** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-413-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 232.40	ESTIMATED			2024 Taxes: \$ 711.83
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LT 15 BLK 2 151402.000 84-6306 50X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	17,047	0	18,724		
	2024	1,653	0	18,833	0	20,486		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 56,499 **Non-Farm Value: 61,458**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	SEN FREEZE	4627
	OWNER OCCUPD ELDERLY	6000
		5000
2024	OWNER OCCUPD ELDERLY	6000
		5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-413-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-413-013-00 150 HAROLD ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HAYTER VIRGILYN K

222 MASON ST
PO BOX 209
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,523** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-413-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 749.28	ESTIMATED			2024 Taxes: \$ 1,389.96
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LT 14 BLK 2 99-04827 151401.000 50X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	14,308	0	15,985		
	2024	1,653	0	16,870	0	18,523		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 50,610 **Non-Farm Value: 55,569**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1999	\$23,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-413-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-414-001-00 121 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILLER TREVOR E

Address to send notice if different than shown at left:

2193 ADLAI STEVENSON DR
 SPRINGFIELD IL 62703

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,450** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-414-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 732.02		ESTIMATED		2024 Taxes: \$ 709.13
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 11 & 12 BLK 1 MHRE 151374.000 2001-03507 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,178	0	7,577	0	9,755		
	2024	2,147	0	7,303	0	9,450		

Land Fair Cash Val: 6,441 Building Fair Cash Val: 21,909 **Non-Farm Value: 28,350**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
05/18/2021	\$15,000	2021R02067	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-414-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-414-002-00 119 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BELL KEVIN & CRYSTAL
% EDWARD & REBECCA CLEETON

PO BOX 44
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,020** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-414-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 544.72		ESTIMATED	2024 Taxes: \$ 941.90
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LT 10 BLK 1 97-06524 151373.000 97-06525 50X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,428	0	15,299	0	16,727	
	2024	1,653	0	20,367	0	22,020	

Land Fair Cash Val: 4,959 Building Fair Cash Val: 61,101 **Non-Farm Value: 66,060**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 3468
2024	OWNER OCCUPD IMPROVEMENT	6000 3468

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/25/2009	\$19,900	2009R06585	No
06/20/2014	\$28,000	2014R02285	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-414-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-414-003-00 117 MIDLAND BLVD TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

POP JOSEPH E & DEBORAH A

117 MIDLAND BLVD
PO BOX 61
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,053** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-414-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 3,4,5,6,7,8,9 BLK 1 151372.000 87-19245 350X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	11,740	0	18,988	0	30,728		
	2024	11,570	0	21,483	0	33,053		

Land Fair Cash Val: 34,710 Building Fair Cash Val: 64,449 **Non-Farm Value: 99,159**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled 70-100% Ve	19728
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled 70-100% Ve	22053

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-414-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-414-006-00 TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SOUTH FORK SANITARY DIST

Address to send notice if different than shown at left:

PO BOX 147
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-414-006-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 1 & 2 BLK 1 115.8X130 98-01242 2001-06703	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-08-414-006-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-414-008-00 108 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEWEESE NICOLE &
 JERRY DIAL
 216 BORAH AVE
 PO BOX 23
 TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,123** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-414-008-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 542.40		ESTIMATED	2024 Taxes: \$ 534.51
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 21, 22, 23 & 24 BLK 1 2003R00740 215.46X130' 151383.000 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	7,228	0	0	0	7,228	
	2024	7,123	0	0	0	7,123	

Land Fair Cash Val: 21,369 Building Fair Cash Val: 0 **Non-Farm Value: 21,369**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
02/01/2016	\$3,500	2016R00385	No
08/23/2018	\$70,000	2018R02759	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
 Signed: _____ Date ___ / ___ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-414-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-414-009-00 106 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEWEESE NICOLE &
 JERRY DIAL
 216 BORAH AVE
 PO BOX 23
 TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-414-009-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 125.84		ESTIMATED		2024 Taxes: \$ 124.04
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LT 20 BLK 1 151383.001 80-33934 50X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	0	0	1,677		
	2024	1,653	0	0	0	1,653		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 0 **Non-Farm Value: 4,959**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
02/01/2016	\$3,500	2016R00385	No
08/23/2018	\$70,000	2018R02759	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-414-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-414-010-00 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEWEESE NICOLE &
 JERRY DIAL
 216 BORAH AVE
 PO BOX 23
 TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,307** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-414-010-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 251.76		ESTIMATED 2024 Taxes: \$ 248.16	
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 18 & 19 BLK 1 2003R00487 151381.000 98-01242 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,355	0	0	0	3,355	
	2024	3,307	0	0	0	3,307	

Land Fair Cash Val: 9,921 Building Fair Cash Val: 0 **Non-Farm Value: 9,921**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/23/2018	\$70,000	2018R02759	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-414-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-414-011-00 116 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEWEESE NICOLE & JERRY DIAL

Address to send notice if different than shown at left:

PO BOX 218
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,690** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-414-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,618.02		ESTIMATED		2024 Taxes: \$ 1,777.69
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 15 16 & 17 BLK 1 99-03494 151378.000 99-02665 150X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	16,530	0	21,562		
	2024	4,960	0	18,730	0	23,690		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 56,190 **Non-Farm Value: 71,070**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
04/01/1999	\$33,000		Yes
08/23/2018	\$70,000	2018R02759	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-414-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-414-012-00 122 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DIAL JERRY L

216 BORAH AVE
PO BOX 23
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,944** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-414-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 840.68	ESTIMATED			2024 Taxes: \$ 1,196.43
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 13 & 14 BLK 1 151376.000 91-04751 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	7,848	0	11,203		
	2024	3,307	0	12,637	0	15,944		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 37,911 **Non-Farm Value: 47,832**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/04/2007	\$11,500	2007R04853	No
09/22/2009	\$25,000	2009R05430	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-414-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-415-001-00 200 HAROLD ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOWARD JOANN & KEVIN

Address to send notice if different than shown at left:

PO BOX 65
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,897** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-415-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,178.58		ESTIMATED	2024 Taxes: \$ 1,267.95
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 11 12 & 13 BLK 3 151424.000 B323 P491 150X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,032	0	21,674	0	26,706	
	2024	4,960	0	22,937	0	27,897	

Land Fair Cash Val: 14,880 Building Fair Cash Val: 68,811 **Non-Farm Value: 83,691**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-415-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-415-003-00 217 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEAT CHERYL J & RICHARD B SR

217 MASON ST
PO BOX 174
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,627** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-415-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 390.96		ESTIMATED		2024 Taxes: \$ 390.96
Legal Description RICKS AMENDED ADD TO HOMPHREY TOVEY LOTS 7, 8, 9, & 10 BLK 3 2001R07906 2002R03842 200X130' 151422.000 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,711	0	16,683	0	23,394		
	2024	6,610	0	19,017	0	25,627		

Land Fair Cash Val: 19,830 Building Fair Cash Val: 57,051 **Non-Farm Value: 76,881**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	7184
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	9417

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-415-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-415-005-01 205 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HAYNES MADONNA

Address to send notice if different than shown at left:

PO BOX 91
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$39,226** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-415-005-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,821.82		ESTIMATED	2024 Taxes: \$ 1,967.99
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 3 4 5 & 6 BLK 3 CFD 93 151416.001 MHRE 200X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	6,711	0	30,567	0	37,278	
	2024	6,613	0	32,613	0	39,226	

Land Fair Cash Val: 19,839 Building Fair Cash Val: 97,839 **Non-Farm Value: 117,678**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled Person	2000
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled Person	2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-415-005-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-415-006-00 201 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

STOCKDALE JAMES & EBONEY

201 MASON ST
PO BOX 228
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,434** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-415-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 780.94		ESTIMATED		2024 Taxes: \$ 858.01
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 1 & 2 BLK 3 2002-01330 100X130 12-08-H 77-12208 97-05464 151414.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	13,052	0	16,407		
	2024	3,307	0	14,127	0	17,434		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 42,381 **Non-Farm Value: 52,302**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
09/01/1997	\$65,000		Yes
08/28/2017	\$40,000	2017R03123	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-415-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-415-007-00 200 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HEAD KIMBERLY

Address to send notice if different than shown at left:

PO BOX 384
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,574** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-415-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 626.82		ESTIMATED 2024 Taxes: \$ 718.43	
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 25 & 26 BLK 3 1982R40909 100X130' 151438.000 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,355	0	10,998	0	14,353	
	2024	3,307	0	12,267	0	15,574	

Land Fair Cash Val: 9,921 Building Fair Cash Val: 36,801 **Non-Farm Value: 46,722**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/15/2006	\$32,500	2006R03981	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-415-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-415-008-00 206 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FOSTER GLORIA & EARL

206 LINKINS AVE
PO BOX 37
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,050** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-415-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 22 23 & 24 BLK 3 151436.000 B20 P170 150X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	18,036	0	23,068		
	2024	4,960	0	20,090	0	25,050		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 60,270 **Non-Farm Value: 75,150**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	12068
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	14050

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-415-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-415-010-00 212 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AUSTIN MAURICE & TAMMY L

212 LINKINS AVE
PO BOX 25
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,163** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-415-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 766.76	ESTIMATED			2024 Taxes: \$ 912.71
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 19 20 & 21 BLK 3 151433.000 2002-07847 150X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	11,186	0	16,218		
	2024	4,960	0	13,203	0	18,163		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 39,609 **Non-Farm Value: 54,489**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-415-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-415-012-00 216 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ECK RICHARD A

Address to send notice if different than shown at left:

220 LINKINS AVE
TOVEY IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-415-012-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 125.84	ESTIMATED			2024 Taxes: \$ 124.04
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LT 18 BLK 3 2001-02744 151431.000 99-05367 50X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	0	0	1,677		
	2024	1,653	0	0	0	1,653		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 0 Non-Farm Value: 4,959

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1999	\$1,500		Yes
12/29/2020	\$80,000	2020R05215	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ____ / ____ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-415-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-415-012-00 216 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PRAIRIE STATE BANK & TRUST

2653 W LAWRENCE AVE
 SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-415-012-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 125.84		ESTIMATED	2024 Taxes: \$ 124.04
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LT 18 BLK 3 2001-02744 151431.000 99-05367 50X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,677	0	0	0	1,677	
	2024	1,653	0	0	0	1,653	

Land Fair Cash Val: 4,959 Building Fair Cash Val: 0 **Non-Farm Value: 4,959**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Exemption History **Amount**
Tax Year

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/01/1999	\$1,500		Yes
12/29/2020	\$80,000	2020R05215	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-415-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-415-013-00 220 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ECK RICHARD A

220 LINKINS AVE
PO BOX 161
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,794** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-415-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,263.22	ESTIMATED			2024 Taxes: \$ 1,560.38
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 16 17 BLK 3 2001-02744 151429.000 93-01492 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	19,479	0	22,834		
	2024	3,307	0	23,487	0	26,794		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 70,461 **Non-Farm Value: 80,382**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1993	\$29,900		Yes
12/29/2020	\$80,000	2020R05215	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-415-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-415-013-00 220 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PRAIRIE STATE BANK & TRUST

Address to send notice if different than shown at left:

2653 W LAWRENCE AVE
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,794** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-415-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,263.22		ESTIMATED		2024 Taxes: \$ 1,560.38
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 16 17 BLK 3 2001-02744 151429.000 93-01492 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	19,479	0	22,834		
	2024	3,307	0	23,487	0	26,794		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 70,461 **Non-Farm Value: 80,382**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1993	\$29,900		Yes
12/29/2020	\$80,000	2020R05215	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-415-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-415-014-00 222 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ALZUGARY DAVID & CAROLYN A

Address to send notice if different than shown at left:

PO BOX 103
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,250** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-415-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 879.78	ESTIMATED			2024 Taxes: \$ 243.88
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LT 15 BLK 3 151428.000 B203 P12 50X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	16,047	0	17,724		
	2024	1,653	0	12,597	0	14,250		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 37,791 **Non-Farm Value: 42,750**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	0

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/12/2021	\$42,000	2021R04345	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-415-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-415-015-00 224 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SZABO ALEX ANDREW

224 LINKINS AVE
PO BOX 57
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,526** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-415-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LT 14 BLK 3 151427.000 50X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	13,093	0	14,770		
	2024	1,653	0	13,873	0	15,526		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 41,619 **Non-Farm Value: 46,578**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	3770
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	4526

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-415-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-416-001-00 200 MURRAY HILL TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ZANOTTI MICHAEL G & CHARLOTTE A

Address to send notice if different than shown at left:

PO BOX 97
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,144** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-416-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,123.12		ESTIMATED		2024 Taxes: \$ 1,123.12
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 11 & 12 BLK 4 151451.000 96-01399 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	27,773	0	31,128		
	2024	3,307	0	29,837	0	33,144		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 89,511 **Non-Farm Value: 99,432**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	5161
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	7177

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-416-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-416-002-00 119 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRIS HUNTER J

Address to send notice if different than shown at left:

PO BOX
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,166** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: ASSESSMENT INCREASED DUE TO REMODELING.

Parcel Number 15-12-08-416-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 316.90	ESTIMATED			2024 Taxes: \$ 237.58
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LT 10 BLK 4 151449.000 96-01399 50X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	8,546	0	10,223		
	2024	1,653	0	7,513	0	9,166		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 22,539 **Non-Farm Value: 27,498**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/06/2022	\$27,500	2022R04392	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-416-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-416-003-00 117 MASON ST TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HANLON TERESA J & JACK G

Address to send notice if different than shown at left:

PO BOX 157
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$44,437** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-416-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,538.22		ESTIMATED	2024 Taxes: \$ 2,884.30
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 6 7 8 & 9 BLK 4 151448.000 87-20340 200X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	6,711	0	33,114	0	39,825	
	2024	6,610	0	37,827	0	44,437	

Land Fair Cash Val: 19,830 Building Fair Cash Val: 113,481 **Non-Farm Value: 133,311**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-416-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-416-004-00 TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HANLON JACK G & TERESA J ADOMITIS

Address to send notice if different than shown at left:

PO BOX 157
TOVEY

IL 62570

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$5,690 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 17,070 Building Fair Cash Val: 0 Non-Farm Value: 17,070

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-416-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-416-005-00 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

WELLS STEVEN W

Address to send notice if different than shown at left:

PO BOX 98
TOVEY

IL 62570

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$2,313 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 6,939 Building Fair Cash Val: 0 Non-Farm Value: 6,939

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-416-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-416-005-01 RUBINI AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WELLS MATTHEW S

Address to send notice if different than shown at left:

PO BOX 47
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$46,100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-416-005-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,891.06		ESTIMATED	2024 Taxes: \$ 3,009.10
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 23 & 24 BLK 4 2003R03218 114.87X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,283	0	41,244	0	44,527	
	2024	3,233	0	42,867	0	46,100	

Land Fair Cash Val: 9,699 Building Fair Cash Val: 128,601 **Non-Farm Value: 138,300**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-416-005-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-416-006-00 250 MURRAY HILL TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WELLS STEVEN W

Address to send notice if different than shown at left:

PO BOX 98
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$42,433** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-416-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,884.26		ESTIMATED		2024 Taxes: \$ 2,208.65
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LT 13 14 & 15 BLK 4 151453.000 77-16990 150X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	33,078	0	38,110		
	2024	4,960	0	37,473	0	42,433		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 112,419 **Non-Farm Value: 127,299**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
2024	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-416-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-417-001-00 225 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PAINE CHAD M

225 LINKINS AVE
PO BOX 237
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,526** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-417-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 517.02	ESTIMATED			2024 Taxes: \$ 544.94
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LT 13 BLK 6 2001-05568 151498.000 98-05457 50X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	11,213	0	12,890		
	2024	1,653	0	20,873	0	22,526		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 62,619 **Non-Farm Value: 67,578**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD IMPROVEMENT	6000 9264

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1998	\$28,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-417-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-417-002-00 223 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LUMB GEORGE A IV & MICHELLE L

Address to send notice if different than shown at left:

PO BOX 165
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,980** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-417-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,422.98	ESTIMATED			2024 Taxes: \$ 1,574.34
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 11 & 12 BLK 6 1997R04760 100X130' 151497.000 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	21,608	0	24,963		
	2024	3,307	0	23,673	0	26,980		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 71,019 **Non-Farm Value: 80,940**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1993	\$35,000		Yes
08/01/2011	\$65,000	2011R03261	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-417-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-417-003-00 219 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCALLIONS BRUCE

219 LINKINS AVE
PO BOX 225
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,960** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-417-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 108.82		ESTIMATED 2024 Taxes: \$ 108.81	
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 9 & 10 BLK 6 151495.000 72-3417 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,355	0	15,902	0	19,257	
	2024	3,307	0	20,653	0	23,960	

Land Fair Cash Val: 9,921 Building Fair Cash Val: 61,959 **Non-Farm Value: 71,880**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	6807
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	11510

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-417-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-417-004-00 215 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LAUHER ALLAN F & LINDA R

Address to send notice if different than shown at left:

PO BOX 118
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,307** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-417-004-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 251.76		ESTIMATED 2024 Taxes: \$ 248.16	
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 7 & 8 BLK 6 98-04156 151491.000 78-18978 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,355	0	0	0	3,355	
	2024	3,307	0	0	0	3,307	

Land Fair Cash Val: 9,921 Building Fair Cash Val: 0 **Non-Farm Value: 9,921**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1998	\$6,000		Yes
09/07/2007	\$6,000	2007R04354	Yes
04/02/2010	\$9,000	2010R01407	No
09/20/2018	\$11,000	2018R03097	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-417-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-417-005-00 211 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LAUHER ALLAN F & LINDA R

211 LINKINS AVE
PO BOX 118
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,544** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-417-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,164.18		ESTIMATED		2024 Taxes: \$ 1,241.46
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 5 & 6 BLK 6 83-45602 151490.000 97-00742 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	23,159	0	26,514		
	2024	3,307	0	24,237	0	27,544		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 72,711 **Non-Farm Value: 82,632**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/1997	\$16,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-417-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-417-006-00 207 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GRAUER CINDA J

207 LINKINS AVE
PO BOX 132
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,456** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-417-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 259.34	ESTIMATED			2024 Taxes: \$ 259.34
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LT 4 BLK 6 151489.000 50X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	16,112	0	17,789		
	2024	1,653	0	19,803	0	21,456		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 59,409 **Non-Farm Value: 64,368**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	3333
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	7000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-417-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-417-007-00 203 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BAKER KENNETH C &
 RONETTE BARRETT
 P O BOX
 205 LINKINS AVE
 TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$43,996** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-417-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,331.94	ESTIMATED			2024 Taxes: \$ 2,851.21
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 2 & 3 BLK 6 151487.000 70-194632 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	33,721	0	37,076		
	2024	3,307	0	40,689	0	43,996		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 122,067 **Non-Farm Value: 131,988**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2021	\$132,000	2021R02241	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-417-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-417-008-00 201 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MINK JOHN G

201 LINKINS AVE
PO BOX 24
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,416** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-417-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,910.22	ESTIMATED			2024 Taxes: \$ 2,132.33
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LT 1 BLK 6 151486.000 82-40966 50X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	29,779	0	31,456		
	2024	1,653	0	32,763	0	34,416		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 98,289 **Non-Farm Value: 103,248**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/10/2009	\$90,000	2009R04718	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-417-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-417-009-00 202 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLEETON REBECCA J

Address to send notice if different than shown at left:

PO BOX 198
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,307** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-417-009-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 251.76		ESTIMATED		2024 Taxes: \$ 248.16
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 25 & 26 BLK 6 151510.000 89-7402 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	0	0	3,355		
	2024	3,307	0	0	0	3,307		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 0 **Non-Farm Value: 9,921**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/10/2009	\$90,000	2009R04718	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-417-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-417-010-00 206 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CROWDER MICHEAL

Address to send notice if different than shown at left:

PO BOX 216
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,530** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-417-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 22 23 24 BLK 6 MHRE 151508.000 2001-04200 150X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	473	0	5,505		
	2024	4,960	0	1,570	0	6,530		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 4,710 **Non-Farm Value: 19,590**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	5005 500
2024	OWNER OCCUPD ELDERLY	6000 530

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-417-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-417-011-00 212 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLEETON REBECCA J

212 BORAH AVE
PO BOX 198
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,413** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-417-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,555.04		ESTIMATED	2024 Taxes: \$ 2,657.38
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 19 20 & 21 BLK 6 MHRE 151504.000 97-01735 150X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,032	0	29,017	0	34,049	
	2024	4,960	0	30,453	0	35,413	

Land Fair Cash Val: 14,880 Building Fair Cash Val: 91,359 **Non-Farm Value: 106,239**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-417-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-417-012-00 216 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUSTAMANTE MICHAEL D & CAITLIN N

Address to send notice if different than shown at left:

PO BOX 148
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$48,774** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-417-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,280.22		ESTIMATED		2024 Taxes: \$ 3,209.75
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 17 & 18 BLK 6 151503.000 91-04439 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	46,358	0	49,713		
	2024	3,307	0	45,467	0	48,774		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 136,401 **Non-Farm Value: 146,322**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/29/2011	\$120,000	2011R03253	Yes
12/01/2023	\$140,000	2023R03544	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-417-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-417-013-00 220 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRYANT TIMOTHY

220 BORAH AVE
PO BOX 137
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,070** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-417-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,724.94	ESTIMATED			2024 Taxes: \$ 1,581.09
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 14 15 & 16 BLK 6 1975R04003 150X130' 151501.000 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	23,955	0	28,987		
	2024	4,960	0	22,110	0	27,070		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 66,330 **Non-Farm Value: 81,210**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/21/2016	\$75,000	2016R02626	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-417-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-418-001-00 123 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WELLS STEVEN W & ROSETTA P

Address to send notice if different than shown at left:

PO BOX 98
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,226** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-418-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 397.04	ESTIMATED			2024 Taxes: \$ 392.16
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LT 12 BLK 5 151474.000 89-8403 50X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,428	0	3,863	0	5,291		
	2024	1,653	0	3,573	0	5,226		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 10,719 **Non-Farm Value: 15,678**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1989	\$1,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-418-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-418-002-00 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WELLS STEVEN W

Address to send notice if different than shown at left:

PO BOX 98
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,377** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-418-002-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 196.00		ESTIMATED 2024 Taxes: \$ 253.41	
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 6 THRU 11 BLK 5 2003R00743 151468.000 98-01242 300X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,612	0	0	0	2,612	
	2024	3,377	0	0	0	3,377	

Land Fair Cash Val: 10,131 Building Fair Cash Val: 0 **Non-Farm Value: 10,131**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-418-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-418-003-00 109 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WELLS STEVEN W

Address to send notice if different than shown at left:

PO BOX 98
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,390** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-418-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 971.84		ESTIMATED 2024 Taxes: \$ 1,680.14	
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 3 4 & 5 BLK 5 2004R06139(QCD) 151467.000 B193 P50 150X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,283	0	8,668	0	12,951	
	2024	4,960	0	17,430	0	22,390	

Land Fair Cash Val: 14,880 Building Fair Cash Val: 52,290 **Non-Farm Value: 67,170**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/10/2007	\$51,000	2007R04393	No
02/03/2017	\$30,000	2017R00449	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-418-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-418-004-00 101 LINKINS AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FASSERO ROBERT E

Address to send notice if different than shown at left:

PO BOX 45
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,644** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-418-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 983.86	ESTIMATED			2024 Taxes: \$ 948.80
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 1 & 2 BLK 5 96-06770 151466.000 73-9134 114.8X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,852	0	15,259	0	19,111		
	2024	3,797	0	14,847	0	18,644		

Land Fair Cash Val: 11,391 Building Fair Cash Val: 44,541 **Non-Farm Value: 55,932**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1996	\$63,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-418-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-418-005-00 102 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TURNER DAVID W

102 BORAH AVE
PO BOX 146
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,357** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-418-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,277.34	ESTIMATED			2024 Taxes: \$ 1,302.47
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 22 23 & 24 BLK 5 151484.000 2002-07223 164X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,500	0	24,522	0	30,022		
	2024	5,420	0	24,937	0	30,357		

Land Fair Cash Val: 16,260 Building Fair Cash Val: 74,811 **Non-Farm Value: 91,071**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	Disabled Person	2000
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	Disabled Person	2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-418-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-418-006-00 108 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AYMER DOROTHY

108 BORAH AVE
PO BOX 52
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,960** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-418-006-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 377.60		ESTIMATED 2024 Taxes: \$ 372.20	
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 19 20 & 21 BLK 5 151482.000 70-194710 150X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,032	0	0	0	5,032	
	2024	4,960	0	0	0	4,960	

Land Fair Cash Val: 14,880 Building Fair Cash Val: 0 **Non-Farm Value: 14,880**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-418-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-418-007-00 114 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WELLS TYLER & SHELBY

114 BORAH AVE
PO BOX 214
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$37,733** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-418-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,237.10	ESTIMATED			2024 Taxes: \$ 2,381.24
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 16 17 & 18 BLK 5 151479.000 76-8597 150X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	30,780	0	35,812		
	2024	4,960	0	32,773	0	37,733		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 98,319 **Non-Farm Value: 113,199**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/18/2018	\$80,000	2018R00204	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-418-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-418-008-00 118 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BURCHI JERRY L

118 BORAH AVE
PO BOX 207
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,060** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-418-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,820.38	ESTIMATED			2024 Taxes: \$ 3,081.13
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 13 14 & 15 BLK 5 151476.000 150X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	43,553	0	48,585		
	2024	4,960	0	47,100	0	52,060		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 141,300 **Non-Farm Value: 156,180**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-418-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-419-002-00 221 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CROWDER MARGARET

221 BORAH AVE
PO BOX 15
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,970** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-419-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3.00	ESTIMATED			2024 Taxes: \$ 3.00
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 10 11 12 & 13 BLK 7 1977R13510 100X130' 151523.000 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,211	0	7,605	0	13,816		
	2024	6,613	0	8,357	0	14,970		

Land Fair Cash Val: 19,839 Building Fair Cash Val: 25,071 **Non-Farm Value: 44,910**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	SEN FREEZE	2776
	OWNER OCCUPD	6000
	ELDERLY	5000
2024	SEN FREEZE	3930
	OWNER OCCUPD	6000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-419-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-419-003-00 217 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GONZALES MICHAEL J

Address to send notice if different than shown at left:

217 BORAH AVE
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,210** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-419-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,458.92		ESTIMATED		2024 Taxes: \$ 1,516.55
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY W25' LOT 8 & ALL 9 BLK 7 1996R05397 1988R04168 75X130' 151520.000 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,514	0	23,434	0	25,948		
	2024	2,480	0	23,730	0	26,210		

Land Fair Cash Val: 7,440 Building Fair Cash Val: 71,190 **Non-Farm Value: 78,630**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
Tax Year 2023 IMPROVEMENT	506

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1996	\$25,600		Yes
05/30/2014	\$63,000	2014R01964	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-419-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-419-005-00 213 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ANDERSON JESSICA

PO BOX
213 BORAH AVE
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,964** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-419-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,281.46		ESTIMATED 2024 Taxes: \$ 1,798.25	
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 5 6 7 & E25' LOT 8 BLK 7 2001R00194 1988R01792 175X130' 151517.000 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,869	0	17,208	0	23,077	
	2024	5,787	0	24,177	0	29,964	

Land Fair Cash Val: 17,361 Building Fair Cash Val: 72,531 **Non-Farm Value: 89,892**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/15/2005	\$18,000	2005R07020	No
01/06/2009	\$53,000	2009R00053	Yes
07/14/2009	\$57,500	2009R04123	No
07/01/2022	\$70,100	2022R02450	Yes
09/07/2022	\$89,900	2022R03271	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-419-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-419-006-00 205 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KOHL KIM

Address to send notice if different than shown at left:

PO BOX 79
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,814** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-419-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,281.00		ESTIMATED 2024 Taxes: \$ 2,012.12	
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 3 & 4 BLK 7 1976R09291 1973R08762 100X130' 151515.000 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,355	0	21,716	0	25,071	
	2024	3,307	0	31,507	0	34,814	

Land Fair Cash Val: 9,921 Building Fair Cash Val: 94,521 **Non-Farm Value: 104,442**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled Person	6000 2000
2024	OWNER OCCUPD Disabled Person	6000 2000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/20/2005	\$79,000	2005R03499	Yes
01/30/2013	\$25,300	2013R00465	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-419-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-419-008-00 425 MURRAY HILL TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

LUMB JUSTIN & LACEE HILE

PO BOX 152 TOVEY

IL 62570

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$2,977 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 8,931 Building Fair Cash Val: 0 Non-Farm Value: 8,931

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Includes sales from 1996, 2021, and 2024)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-419-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-419-009-00 475 MURRAY HILL TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LETTERLE KODY & ASHLEY

475 MURRAY HILL
PO BOX
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$61,661** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-419-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,924.44	ESTIMATED			2024 Taxes: \$ 4,176.79
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 25 & 26 BLK 7 151536.000 2004R05673 100X130' 12-08- H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	48,943	0	52,298		
	2024	3,307	0	58,354	0	61,661		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 175,062 **Non-Farm Value: 184,983**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	0
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2004	\$96,650		Yes
03/25/2010	\$80,000	2010R01238	No
06/25/2018	\$127,500	2018R01987	Yes
06/01/2023	\$100,500	2023R01468	No
11/02/2023	\$185,000	2023R03243	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-419-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-419-010-00 206 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAVATORTA JAMES E & MARALYN

206 CROWDER AVE
PO BOX 231
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,680** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-419-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 350.90	ESTIMATED			2024 Taxes: \$ 350.89
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 23 & 24 BLK 7 1976R10799 100X130' 151534.000 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	23,149	0	26,504		
	2024	3,307	0	24,373	0	27,680		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 73,119 **Non-Farm Value: 83,040**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Exemption History

Amount

Tax Year 2023

OWNER OCCUPD	6000
Disabled Person	2000
IMPROVEMENT	5313
ELDERLY	5000
SEN FREEZE	3515

Tax Year 2024

OWNER OCCUPD	6000
Disabled Person	2000
IMPROVEMENT	5313
ELDERLY	5000
SEN FREEZE	4691

Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-419-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-419-011-00 208 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOBSON JOSIAH & BETHANY

PO BOX
208 CROWDER AVE
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,631** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-08-419-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 831.52	ESTIMATED			2024 Taxes: \$ 1,398.07
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOT 22 BLK 7 151532.001 1987R24549 50X130' 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	15,404	0	17,081		
	2024	1,653	0	22,978	0	24,631		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 68,934 **Non-Farm Value: 73,893**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/18/2016	\$14,929	2016R02546	No
02/13/2018	\$40,000	2018R00474	No
05/13/2022	\$73,900	2022R01771	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-419-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-419-012-00 210 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PLESHE DANA

Address to send notice if different than shown at left:

PO BOX 163
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,210** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-419-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 261.52		ESTIMATED		2024 Taxes: \$ 541.04
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOT 21 BLK 7 1999R03939 1982R43475 50X130' 151532.000 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	9,808	0	11,485		
	2024	1,653	0	13,557	0	15,210		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 40,671 **Non-Farm Value: 45,630**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled Person	2000
2024	Disabled Person	2000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1999	\$26,500	1999R03939	Yes
07/29/2005	\$32,000	2005R04317	Yes
06/21/2019	\$28,000	2019R01978	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-419-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-419-013-00 214 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ADAMS BRENDA S

214 CROWDER AVE
PO BOX 230
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,970** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-419-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 116.10	ESTIMATED			2024 Taxes: \$ 116.09
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 18 19 & 20 BLK 7 1994R06612 150X130' 151530.000 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,032	0	10,746	0	15,778		
	2024	4,960	0	12,010	0	16,970		

Land Fair Cash Val: 14,880 Building Fair Cash Val: 36,030 **Non-Farm Value: 50,910**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	3231
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	4423

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/25/2009	\$38,000	2009R06588	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-419-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-419-014-00 220 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HUBERT JEFFREY D & STACEY L

Address to send notice if different than shown at left:

PO BOX 177
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$48,310** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-419-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,094.80	ESTIMATED			2024 Taxes: \$ 3,174.93
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 14 THRU 17 BLK 7 1998R06797 1997R07136 1985R07906 200X130' 151528.000 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,711	0	40,531	0	47,242		
	2024	6,610	0	41,700	0	48,310		

Land Fair Cash Val: 19,830 Building Fair Cash Val: 125,100 **Non-Farm Value: 144,930**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1998	\$89,900		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-419-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-420-001-00 400 MURRAY HILL TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FRIESLAND ANDERSON

Address to send notice if different than shown at left:

PO BOX 167
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,830** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: IMPROVEMENT ADDED, MAY QUALIFY FOR AN IMPROVEMENT EXEMPTION. CHECK WITH BOARD OF REVIEW. A REVALUATION OF PROPERTY.

Parcel Number 15-12-08-420-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,826.22		ESTIMATED		2024 Taxes: \$ 2,418.91
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY W1/2 LOT 10 & ALL LOTS 11 & 12 BLK 8 151548.000 94-4958 125X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,193	0	40,065	0	44,258		
	2024	4,133	0	34,697	0	38,830		

Land Fair Cash Val: 12,399 Building Fair Cash Val: 104,091 **Non-Farm Value: 116,490**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 595
2024	OWNER OCCUPD IMPROVEMENT	6000 595

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/15/2022	\$115,000	2022R00903	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-420-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-420-003-00 117 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEAT JEREMY & CASSANDRA

Address to send notice if different than shown at left:

PO BOX 197
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$47,360** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-420-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,010.68	ESTIMATED			2024 Taxes: \$ 3,103.65
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 7 8 & 9 & E1/2 LOT 10 BLK 8 151546.000 175X130 2003R07398 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,869	0	40,252	0	46,121		
	2024	5,787	0	41,573	0	47,360		

Land Fair Cash Val: 17,361 Building Fair Cash Val: 124,719 **Non-Farm Value: 142,080**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/18/2010	\$100,000	2010R05406	No
12/01/2014	\$113,000	2014R05006	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-420-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-420-004-00 109 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MAYER JOHN P & STEPHANIE A

109 BORAH AVE
PO BOX 82
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$44,710** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-08-420-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,185.76		ESTIMATED	2024 Taxes: \$ 2,529.59
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 5 & 6 BLK 8 151542.000 77-15803 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,355	0	36,773	0	40,128	
	2024	3,307	0	41,403	0	44,710	

Land Fair Cash Val: 9,921 Building Fair Cash Val: 124,209 **Non-Farm Value: 134,130**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY OWNER OCCUPD	5000
		6000
2024	ELDERLY OWNER OCCUPD	5000
		6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-420-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-420-005-00 107 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

CONSTABLE SHERYL

Address to send notice if different than shown at left:

PO BOX 58 TOVEY

IL 62570

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$19,043 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 4,959 Building Fair Cash Val: 52,170 Non-Farm Value: 57,129

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year 2023, Tax Year 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-420-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-420-006-00 105 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LUMB JUSTIN

105 BORAH AVE
PO BOX 152
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,493** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-420-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 934.48	ESTIMATED			2024 Taxes: \$ 1,162.59
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LT 3 BLK 8 151540.000 91-02537 50X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	18,463	0	20,140		
	2024	1,653	0	19,840	0	21,493		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 59,520 **Non-Farm Value: 64,479**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 1687
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1991	\$30,500		Yes
08/01/2011	\$45,000	2011R03271	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-420-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-420-007-00 103 BORAH AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WELLS ERIC W

103 BORAH AVE
PO BOX 238
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,874** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-420-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 952.48	ESTIMATED			2024 Taxes: \$ 962.69
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 1 & 2 BLK 8 151539.000 114.26X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,731	0	29,407	0	33,138		
	2024	3,777	0	31,097	0	34,874		

Land Fair Cash Val: 11,331 Building Fair Cash Val: 93,291 **Non-Farm Value: 104,622**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	14445
2024	IMPROVEMENT	14445
	IMPROVEMENT	1600

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2010	\$60,000	2010R04448	Yes
02/28/2017	\$15,430	2017R00762	No
06/20/2019	\$40,000	2019R01960	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-420-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-420-008-00 475 RUBINI AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WILLIAMS DENNIS R JR

Address to send notice if different than shown at left:

PO BOX 142
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$49,550** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-420-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,956.72		ESTIMATED	2024 Taxes: \$ 3,267.98	
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 21 22 23 & 24 BLK 8 89-6960 151561.000 98-2214 213.8X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,173	0	38,229	0	45,402		
	2024	7,067	0	42,483	0	49,550		

Land Fair Cash Val: 21,201 Building Fair Cash Val: 127,449 **Non-Farm Value: 148,650**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1998	\$80,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-420-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-420-011-00 108 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ROGERS DOROTHY & DONALD SR

Address to send notice if different than shown at left:

PO BOX 234
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,094** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-420-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED 2024 Taxes: \$ 0.00		
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 19 & 20 BLK 8 MHRE 151557.000 95-05865 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,355	0	6,851	0	10,206	
	2024	3,307	0	9,787	0	13,094	

Land Fair Cash Val: 9,921 Building Fair Cash Val: 29,361 **Non-Farm Value: 39,282**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	4206
	OWNER OCCUPD	6000
	SEN FREEZE	0
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	2094

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1995	\$32,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-420-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-420-013-00 114 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PALMER JOHN & TISHA M

114 CROWDER AVE
PO BOX 182
TOVEY

IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$42,114** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-420-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,365.56	ESTIMATED			2024 Taxes: \$ 2,709.99
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LTS 17 & 18 BLK 8 151555.000 2004R06171 100X130 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	0	34,169	0	37,524		
	2024	3,307	0	38,807	0	42,114		

Land Fair Cash Val: 9,921 Building Fair Cash Val: 116,421 **Non-Farm Value: 126,342**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-420-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-420-015-00 120 CROWDER AVE TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HUBBS SEATH L & LOREN

P O BOX
120 CROWDER AVE
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$54,995** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-420-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 4,068.06	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description RICKS AMENDED ADD TO HUMPHREY TOVEY LOTS 13 14 15 & 16 BLK 8 200X130' 1972R04082 1972R04081 151550.000 12-08-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,711	0	58,501	0	65,212		
	2024	6,610	0	48,385	0	54,995		

Land Fair Cash Val: 19,830 Building Fair Cash Val: 145,155 **Non-Farm Value: 164,985**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Returning Veteran	6000 5000
2024	OWNER OCCUPD Returning Veteran Disabled 70-100% Ve	6000 5000 43995

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/11/2006	\$133,000	2006R03911	Yes
04/25/2014	\$153,700	2014R01447	No
09/17/2020	\$159,900	2020R03603	Yes
03/25/2021	\$165,000	2021R01196	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-08-420-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-501-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ILLINOIS & MIDLAND RR INC
%RAQUEL SWAN EXEC VP & CFO

PO BOX 139
SPRINGFIELD IL 62705

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-501-001-00	Class 5100	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description Not Used	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	
	2024	0	0	0	0	0	0	

15-12-08-501-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-08-501-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ILLINOIS & MIDLAND RR INC
%RAQUEL SWAN EXEC VP & CFO

PO BOX 139
SPRINGFIELD IL 62705

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-08-501-002-00	Class 5100	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 852.54	ESTIMATED			2024 Taxes: \$ 1,874.57
Legal Description TRACK 0.30 MILE STATE ASSESS	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0		
	2024	0	0	0	0	0		

15-12-08-501-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-100-001-00 521 IL RTE 104 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOTTERSHAW VERONA & MICHELLE

Address to send notice if different than shown at left:

PO BOX 124
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$127,663** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-100-001-00	Class 0011	Acreage 55.060	Print Date 9/23/2024	2023 Taxes: \$ 8,460.58		ESTIMATED	2024 Taxes: \$ 8,608.00
Legal Description FARM TRACT #11 BEG NE COR W1/2 NW1/4 S2283.70' W136.42' W19.95' W102.62' W704.76' W142.44' W90.01' TO EDGE OF SANGCHRIS LAKE FOLLOW	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	6,567	26,584	92,514	0	125,665	
	2024	6,470	28,320	92,873	0	127,663	

15-12-09-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY OWNER OCCUPD	5000 6000
2024	ELDERLY OWNER OCCUPD	5000 6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-100-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,165** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-100-001-01	Class 0083	Acreage 16.387	Print Date 9/23/2024	2023 Taxes: \$ 1,086.28		ESTIMATED	2024 Taxes: \$ 1,118.95
Legal Description W1/2 NW1/4 SANGCHRIS LAKE 16.387AC IS FOR SANGCHRIS LAKE 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	14,722	0	0	0	14,722	
	2024	15,165	0	0	0	15,165	

Land Fair Cash Val: 45,495 Building Fair Cash Val: 0 **Non-Farm Value: 45,495**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-100-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-100-002-00 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MATEJOWSKY GAYLA L &
DAYNA M TAYLOR & ANNETTE D FLOOD

3206 LADUE DR
CHAMPAIGN IL 61822

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$56,880** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-100-002-00	Class 0021	Acreage 70.420	Print Date 9/23/2024	2023 Taxes: \$ 3,953.48		ESTIMATED	2024 Taxes: \$ 4,196.90
Legal Description E1/2 NW1/4 LY N C&IM RAILROAD EX 2.50AC ROAD & EX 1.00AC SW COR & EX 3.05AC 150070.000 87-24092	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	53,581	0	0	53,581	
	2024	0	56,880	0	0	56,880	

15-12-09-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-100-003-00 549 IL RTE 104 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MATEJOWSKY GAYLA L &
DAYNA M TAYLOR & ANNETTE D FLOOD

3206 LADUE DR
CHAMPAIGN IL 61822

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$54,517** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-100-003-00	Class 0011	Acreage 3.050	Print Date 9/23/2024	2023 Taxes: \$ 3,861.84		ESTIMATED		2024 Taxes: \$ 4,022.55
Legal Description PART OF W3/4 N1/2 150070.001 68-187584	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,424	1,353	42,562	3,000	52,339		
	2024	5,417	1,440	44,660	3,000	54,517		

15-12-09-100-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-100-004-00 526 IL RTE 104 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLISSETT CYNTHIA K

Address to send notice if different than shown at left:

526 ILLINOIS ROUTE 104 W
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$37,247** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-100-004-00	Class 0010	Acreage 0.562	Print Date 9/23/2024	2023 Taxes: \$ 1,093.42		ESTIMATED	2024 Taxes: \$ 1,093.42
Legal Description BEG SW COR SE1/4 NW1/4 E151.17' N136.91' W154.92' S156.76'TO POB & BEG SE COR W1/2 N129.50' W3.50' N156.76' E3.53' S156.27' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,996	0	31,715	0	35,711	
	2024	3,940	0	33,307	0	37,247	

Land Fair Cash Val: 11,820 Building Fair Cash Val: 99,921 **Non-Farm Value: 111,741**

****Required**** Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	IMPROVEMENT	4884
	ELDERLY	5000
	SEN FREEZE	5008
2024	OWNER OCCUPD	6000
	IMPROVEMENT	4884
	ELDERLY	5000
	SEN FREEZE	6544

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2003	\$58,000		Yes
09/02/2009	\$96,500	2009R05098	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-100-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-200-001-00 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MATEJOWSKY GAYLA L &
DAYNA M TAYLOR & ANNETTE D FLOOD

3206 LADUE DR
CHAMPAIGN IL 61822

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$54,627** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-200-001-00	Class 0011	Acreage 74.000	Print Date 9/23/2024	2023 Taxes: \$ 3,774.92		ESTIMATED	2024 Taxes: \$ 4,030.66
Legal Description W1/2 NE1/4 LY N C&IM RAILROAD EX 2.50AC HARD ROAD & EX .43AC IN SE1/4 SW1/4 NE1/4 87-24092 150070.002	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	50,811	0	350	51,161	
	2024	0	54,277	0	350	54,627	

15-12-09-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-200-001-01

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MATEJOWSKY GAYLA L & DAYNA M TAYLOR & ANNETTE D FLOOD

3206 LADUE DR CHAMPAIGN IL 61822

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$40,043 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 1,323 Building Fair Cash Val: 118,806 Non-Farm Value: 120,129

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-200-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-200-002-00 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARAS IVAN E & LORRAINE

UNIT 6A
1111 COMMUNITY DR
ROCHESTER IL 62563

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,481** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-200-002-00	Class 0021	Acreage 37.780	Print Date 9/23/2024	2023 Taxes: \$ 1,901.52		ESTIMATED	2024 Taxes: \$ 2,027.69
Legal Description NE 1/4 NE 1/4 EX BEG NE COR LOT 1 BLK 11 BULPITT'S FOURTH ADD N145.2' E300' S145.20' W300' TO POB & EX BEG NE COR LOT 1 BLK 10 BULPITT'S FOURTH ADD W140'	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	25,771	0	0	25,771	
	2024	0	27,481	0	0	27,481	

15-12-09-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-200-003-00 1688 N 600 EAST RD BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEIKLE KEVIN L & LAURA J

Address to send notice if different than shown at left:

PO BOX 574
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$61,814** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-200-003-00	Class 0010	Acreage 1.000	Print Date 9/23/2024	2023 Taxes: \$ 4,471.16		ESTIMATED		2024 Taxes: \$ 4,560.96
Legal Description S280 N613.2 E155.57 NE1/4 NE1/4 97-04729 150068.001 89-8988 280X155.7	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	11,210	0	49,387	0	60,597		
	2024	11,047	0	50,767	0	61,814		

Land Fair Cash Val: 33,141 Building Fair Cash Val: 152,301 **Non-Farm Value: 185,442**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1997	\$115,000		Yes
06/29/2011	\$150,000	2011R02811	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-200-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-201-001-00 460 GEORGE ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NOREN MARINA NICOLE

Address to send notice if different than shown at left:

460 GEORGE ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,632** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-201-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,236.44	ESTIMATED			2024 Taxes: \$ 806.74
Legal Description BULPITT 4TH ADD LOTS 4 5 & 6 BLK 9 150975.000 140.64X122.8 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,111	0	18,184	0	22,295		
	2024	4,050	0	12,582	0	16,632		

Land Fair Cash Val: 12,150 Building Fair Cash Val: 37,746 **Non-Farm Value: 49,896**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/18/2022	\$49,900	2022R00223	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-201-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-201-001-00 460 GEORGE ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PETEFISH SKILES & CO BANK

Address to send notice if different than shown at left:

PO BOX 18
VIRGINIA

IL 62691

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,632** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-201-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,236.44	ESTIMATED			2024 Taxes: \$ 806.74
Legal Description BULPITT 4TH ADD LOTS 4 5 & 6 BLK 9 150975.000 140.64X122.8 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,111	0	18,184	0	22,295		
	2024	4,050	0	12,582	0	16,632		

Land Fair Cash Val: 12,150 Building Fair Cash Val: 37,746 **Non-Farm Value: 49,896**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/18/2022	\$49,900	2022R00223	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-201-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-201-002-00 401 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILONCUS JOSEPH M & TAMMY S

Address to send notice if different than shown at left:

401 JAMES ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,567** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-201-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 834.82		ESTIMATED 2024 Taxes: \$ 1,029.44	
Legal Description BULPITT 4TH ADD LOTS 2 & 3 BLK 9 1999R04208 89.6X140' 150973.000 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,793	0	14,209	0	17,002	
	2024	2,750	0	16,817	0	19,567	

Land Fair Cash Val: 8,250 Building Fair Cash Val: 50,451 **Non-Farm Value: 58,701**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/29/2014	\$30,000	2014R03428	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-201-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-201-003-00 405 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FLICKINGER WILLIAM M & TANYA A

Address to send notice if different than shown at left:

405 JAMES ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$63,720** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-201-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,550.06	ESTIMATED			2024 Taxes: \$ 4,379.71
Legal Description BULPITT 4TH ADD LT 1 BLK 9 2003R03031 150971.000 2002-03016 45X140 12-09-D 97-04212 88-5502 81-36629	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,402	0	38,205	0	39,607		
	2024	1,383	0	62,337	0	63,720		

Land Fair Cash Val: 4,149 Building Fair Cash Val: 187,011 **Non-Farm Value: 191,160**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-201-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-202-001-00 404 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PAGLIAI JERRY L & GEORGIANNA M

Address to send notice if different than shown at left:

402 JAMES ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,426** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-202-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 667.28	ESTIMATED			2024 Taxes: \$ 715.23
Legal Description BULPITT 4TH ADD LT 6 BLK 10 150980.000 94-5675 45X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,402	0	7,392	0	8,794		
	2024	1,383	0	8,043	0	9,426		

Land Fair Cash Val: 4,149 Building Fair Cash Val: 24,129 **Non-Farm Value: 28,278**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-202-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-202-002-00 402 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PAGLIAI JERRY L & GEORGIANNA M

Address to send notice if different than shown at left:

402 JAMES ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,457** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-202-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 426.98	ESTIMATED			2024 Taxes: \$ 793.46
Legal Description BULPITT 4TH ADD LOTS 4 & 5 BLK 10 91-05539 150979.000 B211 P58 89.5X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,789	0	17,672	0	20,461		
	2024	2,747	0	18,710	0	21,457		

Land Fair Cash Val: 8,241 Building Fair Cash Val: 56,130 **Non-Farm Value: 64,371**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 SEN FREEZE	3834

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-202-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-202-003-00 401 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FUNSCH SCOTT M

Address to send notice if different than shown at left:

401 HENRY ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,631** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-202-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,679.28	ESTIMATED			2024 Taxes: \$ 1,944.84
Legal Description BULPITT 4TH ADD LOTS 2 & 3 BLK 10 150977.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
94-03338 89.5X140 12-09-D	2023	2,789	0	25,342	0	28,131		
	2024	2,747	0	28,884	0	31,631		

Land Fair Cash Val: 8,241 Building Fair Cash Val: 86,652 **Non-Farm Value: 94,893**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/08/2022	\$94,900	2022R02558	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-202-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-202-004-00 405 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRADEWAYS LLC

23 JEFFEREY LN
HAVERHILL MA 01832

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,796** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-202-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 336.98	ESTIMATED			2024 Taxes: \$ 439.79
Legal Description BULPITT 4TH ADD LOT 1 BLK 10 EX FOR TRIANGULAR TRACT BEG 20'W NE COR LOT 1 TH E20' N LIN TO NE COR LOT 1 20' S ALONG E LNE OF LOT 1 TH NWLY TO POB &	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,402	0	3,039	0	4,441		
	2024	1,383	0	4,413	0	5,796		

Land Fair Cash Val: 4,149 Building Fair Cash Val: 13,239 **Non-Farm Value: 17,388**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/16/2006	\$4,000	2006R03992	Yes
12/05/2012	\$15,000	2012R06641	Yes
08/01/2014	\$19,900	2014R02873	Yes
08/02/2024	\$6,600	2024R02287	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-202-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-202-005-00 407 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKINNER JESSICA

Address to send notice if different than shown at left:

407 HENRY ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,997** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-202-005-00	Class 0040	Acreage 0.160	Print Date 9/23/2024	2023 Taxes: \$ 1,785.12		ESTIMATED		2024 Taxes: \$ 1,744.98
Legal Description COM NE COR LOT 1 BLK 10 BULPITT 4TH ADD RN W140' N50' E140' S50' & A TRIANGULAR TRACT BEG 20'W NE COR LOT 1 TH E20' N LINE TO NE COR LOT 1	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,559	0	27,967	0	29,526		
	2024	1,537	0	27,460	0	28,997		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 82,380 **Non-Farm Value: 86,991**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/16/2005	\$3,250	2005R02786	Yes
04/08/2013	\$55,000	2013R01474	Yes
06/29/2021	\$87,000	2021R02654	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-202-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-203-001-00 404 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURVEY BERNARD A & JANE E (LSR)
FOR TROY & CARLY TRIMBLE (LSE)

PO BOX 677
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,900** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-203-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 600.06	ESTIMATED			2024 Taxes: \$ 751.20
Legal Description BULPITT 4TH ADD N1/2 LT 5 & ALL LT 6 BLK 11 2004R06782 & 83 150986.000 68X142 12-09-D 75-424	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,141	0	11,767	0	13,908		
	2024	2,110	0	13,790	0	15,900		

Land Fair Cash Val: 6,330 Building Fair Cash Val: 41,370 **Non-Farm Value: 47,700**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000
2024	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-203-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-203-002-00 400 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURVEY BERNARD A & JANE E (LSR)
FOR TALON NAVE (LSE)

PO BOX 677
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,877** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-203-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 168.22		ESTIMATED 2024 Taxes: \$ 1,356.48	
Legal Description BULPITT 4TH ADD LT 4 & S1/2 LT 5 BLK 11 150984.000 2004R03468 67X142 12-09-D 78-23806	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,161	0	3,049	0	4,210	
	2024	2,077	0	21,800	0	23,877	

Land Fair Cash Val: 6,231 Building Fair Cash Val: 65,400 **Non-Farm Value: 71,631**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	1993
<u>Tax Year</u> 2024 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1978	\$22,500		Yes
11/17/2016	\$25,000	2016R04323	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-203-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-203-003-00 401 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CHAMBERS THOMAS & SHANNON

Address to send notice if different than shown at left:

401 GARRISON ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,807** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-203-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 719.34	ESTIMATED			2024 Taxes: \$ 820.02
Legal Description BULPITT 4TH ADD LT 3 BLK 11 2003R00719 44.5X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,402	0	14,078	0	15,480		
	2024	1,380	0	15,427	0	16,807		

Land Fair Cash Val: 4,140 Building Fair Cash Val: 46,281 **Non-Farm Value: 50,421**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/09/2013	\$30,000	2013R03576	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-203-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-203-004-00 405 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WARREN MARY SUE

Address to send notice if different than shown at left:

405 GARRISON ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$39,866** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-203-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,064.74		ESTIMATED 2024 Taxes: \$ 1,173.08	
Legal Description BULPITT 4TH ADD LTS 1&2 BLK 11 98-00686 150981.000 99-01536 90X142 12-09-D 81-36629	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,834	0	35,604	0	38,438	
	2024	2,793	0	37,073	0	39,866	

Land Fair Cash Val: 8,379 Building Fair Cash Val: 111,219 **Non-Farm Value: 119,598**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	IMPROVEMENT	13406
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	IMPROVEMENT	13406

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-203-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-203-005-00 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF BULPITT
VILLAGE HALL

PO BOX 47
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-203-005-00	Class 9900	Acreage 1.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description 1A IN CENTER S SIDE NE NE CITY HALL ST DOC# 85-11-54 1972R01292 150068.003 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-09-203-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-204-001-00 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WARREN DALE R & MARY SUE

Address to send notice if different than shown at left:

405 GARRISON ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,793** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-204-001-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 215.04	ESTIMATED			2024 Taxes: \$ 211.93
Legal Description BULPITT 4TH ADD LTS 5&6 BLK 12 99-03147 150990.000 99-03148 90X142 12-09-D 84-1145	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,834	0	0	0	2,834		
	2024	2,793	0	0	0	2,793		

Land Fair Cash Val: 8,379 Building Fair Cash Val: 0 **Non-Farm Value: 8,379**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/1984	\$2,200		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-204-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-204-002-00 400 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TILLEY PAUL A

Address to send notice if different than shown at left:

PO BOX 642
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,924** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-204-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,028.68		ESTIMATED	2024 Taxes: \$ 1,056.53	
Legal Description BULPITT 4TH ADD LT 4 BLK 12 150989.000 75-3387 45X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,415	0	12,142	0	13,557		
	2024	1,397	0	12,527	0	13,924		

Land Fair Cash Val: 4,191 Building Fair Cash Val: 37,581 **Non-Farm Value: 41,772**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-204-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-204-003-00 401 N MAIN ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SANCHEZ BRYAN

Address to send notice if different than shown at left:

401 MAIN ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,294** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-204-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED 2024 Taxes: \$ 41.35	
Legal Description BULPITT 4TH ADD LOTS 1 2 & 3 91-6450 150988.000 86-15917 44.6X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,237	0	2,009	0	6,246	
	2024	4,177	0	7,117	0	11,294	

Land Fair Cash Val: 12,531 Building Fair Cash Val: 21,351 **Non-Farm Value: 33,882**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	5701
	Disabled Person	0
	ELDERLY	545
	SEN FREEZE	0
2024	OWNER OCCUPD	5775
	IMPROVEMENT	4974

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/12/2023	\$15,000	2023R02560	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-204-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-205-001-00 495 GEORGE ST BULPITT

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

CONAWAY LARRY R & GEORGIA N

Address to send notice if different than shown at left:

495 GEORGE ST
BULPITT IL 62517

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$20,332 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 4,371 Building Fair Cash Val: 56,625 Non-Farm Value: 60,996

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows 2023 and 2024 exemptions for OWNER OCCUPD at 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows sale on 09/22/2023 for \$61,000 with Doc# 2023R02692 and Qualified? Yes.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-205-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-205-002-00 485 GEORGE ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PATTERSON RYAN & BLAIR &
GREG & JANICE HARRISON

4669 BROOKVIEW DR
AUBURN IL 62615

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,094** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-205-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 175.20	ESTIMATED			2024 Taxes: \$ 1,297.07
Legal Description BULPITT 3RD ADD LT 11 BLK 8 97-02364 150969.000 2000-01084 47X142 12-09-D 90-04362	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,481	0	828	0	2,309		
	2024	1,457	0	15,637	0	17,094		

Land Fair Cash Val: 4,371 Building Fair Cash Val: 46,911 **Non-Farm Value: 51,282**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1997	\$26,000		Yes
11/28/2011	\$13,000	2011R05460	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-205-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-205-003-00 475 GEORGE ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURVEY BERNARD A & JANE E (LSR)
FOR DAN MOFFATT (LSE)

PO BOX 677
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,240** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-205-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 889.14		ESTIMATED 2024 Taxes: \$ 549.36	
Legal Description BULPITT 3RD ADD LT 12 BLK 8 150970.000 82-43589 47X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,481	0	10,237	0	11,718	
	2024	1,457	0	11,783	0	13,240	

Land Fair Cash Val: 4,371 Building Fair Cash Val: 35,349 **Non-Farm Value: 39,720**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

<u>Exemption History</u>	<u>Amount</u>
Tax Year 2024 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1982	\$8,500		Yes
02/21/2023	\$16,500	2023R00448	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-205-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-205-004-00 311 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WICKS RUTH ANN

Address to send notice if different than shown at left:

PO BOX 432
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,857** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-205-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,101.08		ESTIMATED		2024 Taxes: \$ 1,203.21
Legal Description BULPITT 3RD ADD LT 1 BLK 8 97-07243 97-01338 50X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,559	0	19,652	0	21,211		
	2024	1,537	0	20,320	0	21,857		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 60,960 Non-Farm Value: **65,571**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 700
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1994	\$25,000		Yes
03/12/2014	\$35,000	2014R00833	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-205-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-205-005-00 309 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RODDEN JOSEPH P

309 JAMES ST
PO BOX 342
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,410** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-205-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,674.80		ESTIMATED 2024 Taxes: \$ 1,700.44	
Legal Description BULPITT 3RD ADD LOTS 2 & 3 BLK 8 150961.000 100X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,117	0	24,955	0	28,072	
	2024	3,070	0	25,340	0	28,410	

Land Fair Cash Val: 9,210 Building Fair Cash Val: 76,020 **Non-Farm Value: 85,230**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/11/2007	\$67,000	2007R02826	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-205-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-205-007-00 303 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RODDEN JOSEPHINE E

Address to send notice if different than shown at left:

303 JAMES ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,854** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-205-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 932.32	ESTIMATED			2024 Taxes: \$ 932.32
Legal Description BULPITT 3RD ADD LT 4 5 & 6 BLK 8 150964.000 150X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,673	0	25,596	0	30,269		
	2024	4,607	0	28,247	0	32,854		

Land Fair Cash Val: 13,821 Building Fair Cash Val: 84,741 **Non-Farm Value: 98,562**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY SEN FREEZE	6000 5000 9567

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/30/2007	\$60,000	2007R02125	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-205-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-205-009-00 450 EDWARD ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF BULPITT
VILLAGE HALL

PO BOX 47
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-205-009-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description BULPITT 3RD ADD LT 7 BLK 8 FIREHOUSE 47X142 ST DOC# 85-11-56 150965.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-09-205-009-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-205-010-00 460 EDWARD ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DENNING DONALD A & LISA A

Address to send notice if different than shown at left:

459 EDWARDS ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,727** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-205-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 289.56		ESTIMATED		2024 Taxes: \$ 282.80
Legal Description BULPITT 3RD ADD LOTS 8 & 9 BLK 8 150966.000 2002R08531 94X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,958	0	858	0	3,816		
	2024	2,917	0	810	0	3,727		

Land Fair Cash Val: 8,751 Building Fair Cash Val: 2,430 **Non-Farm Value: 11,181**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/2002	\$2,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-205-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-206-001-00 310 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KINGDOM EQUITY PROPERTIES LLC

Address to send notice if different than shown at left:

8 TIMBERLINE DR
SPRINGFIELD IL 62711

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,874** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-206-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,257.38	ESTIMATED			2024 Taxes: \$ 1,204.50
Legal Description BULPITT 3RD ADD LT 12 BLK 7 2002-07743 150959.000 69-192812 50X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,559	0	15,012	0	16,571		
	2024	1,537	0	14,337	0	15,874		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 43,011 **Non-Farm Value: 47,622**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/25/2014	\$37,000	2014R01014	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-206-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-206-002-00 308 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RODDEN JOSEPH P

309 JAMES ST
PO BOX 342
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,427** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-206-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 311.18	ESTIMATED			2024 Taxes: \$ 563.55
Legal Description BULPITT 3RD ADD LT 11 BLK 7 2003R06788 2003R06787 150958.000 86-13872 50X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,559	0	2,542	0	4,101		
	2024	1,537	0	5,890	0	7,427		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 17,670 **Non-Farm Value: 22,281**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2003	\$9,000		Yes
10/27/2009	\$22,600	2009R06020	Yes
06/09/2017	\$21,500	2017R02116	No
06/14/2017	\$10,000	2017R02166	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-206-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-206-003-00 306 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RODDEN JOSEPH P

Address to send notice if different than shown at left:

PO BOX 342
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,537** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-206-003-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 118.30		ESTIMATED 2024 Taxes: \$ 116.63	
Legal Description BULPITT 3RD ADD LOT 10 BLK 7 150957.000 2003R04695 50X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,559	0	0	0	1,559	
	2024	1,537	0	0	0	1,537	

Land Fair Cash Val: 4,611 Building Fair Cash Val: 0 **Non-Farm Value: 4,611**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1992	\$2,000		Yes
08/29/2012	\$2,000	2012R04831	No
05/02/2017	\$2,000	2017R01585	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-206-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-206-004-00 304 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KOONCE JAMES L & PENNY L

Address to send notice if different than shown at left:

304 JAMES ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,514** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-206-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 37.94	ESTIMATED			2024 Taxes: \$ 39.00
Legal Description BULPITT 3RD ADD LT 9 BLK 7 150955.000 2003R03821 50X140 12-09-D 1987R22584	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,559	0	2,243	0	3,802		
	2024	1,537	0	4,977	0	6,514		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 14,931 **Non-Farm Value: 19,542**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	3302
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-206-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-206-006-00 300 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BEAMER ELMER & BRENDA E

Address to send notice if different than shown at left:

300 JAMES ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,053** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-206-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description BULPITT 3RD ADD LOTS 7 & 8 BLK 7 150953.000 85-7987 100X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,117	0	19,943	0	23,060		
	2024	3,070	0	21,983	0	25,053		

Land Fair Cash Val: 9,210 Building Fair Cash Val: 65,949 **Non-Farm Value: 75,159**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	12060
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	14053

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-206-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-206-007-00 300 EDWARD ST BULPITT

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

POP JO ANN

300 EDWARD ST
PO BOX 903
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$17,634 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 4,611 Building Fair Cash Val: 48,291 Non-Farm Value: 52,902

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Lists exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-206-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-206-008-00 303 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SISTI JESSICA

Address to send notice if different than shown at left:

303 HENRY ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,773** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-206-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,081.96	ESTIMATED			2024 Taxes: \$ 1,955.62
Legal Description BULPITT 3RD ADD LT 4 & 5 BLK 7 150951.000 2004R03143 100X140 12-09-D 96-00231 B160 P332	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,117	0	30,321	0	33,438		
	2024	3,070	0	28,703	0	31,773		

Land Fair Cash Val: 9,210 Building Fair Cash Val: 86,109 **Non-Farm Value: 95,319**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2004	\$39,500		Yes
07/29/2014	\$13,500	2014R02804	No
09/01/2017	\$85,900	2017R03210	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-206-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-206-010-00 307 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DRESSEN KENNETH A & VICKI A

Address to send notice if different than shown at left:

307 HENRY ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,124** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-206-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 148.50		ESTIMATED 2024 Taxes: \$ 85.29	
Legal Description BULPITT 3RD ADD LT 3 BLK 7 150949.000 99-03048 50X140 12-09-D CFD92 91-00943	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,559	0	11,398	0	12,957	
	2024	1,537	0	10,587	0	12,124	

Land Fair Cash Val: 4,611 Building Fair Cash Val: 31,761 **Non-Farm Value: 36,372**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY SEN FREEZE	6000 5000 0

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/12/2005	\$25,000	2005R02696	No
09/11/2006	\$42,500	2006R04414	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-206-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-206-012-00 311 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DOWNS SHIRLENE F

Address to send notice if different than shown at left:

PO BOX 82
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,770** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-206-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 298.96	ESTIMATED			2024 Taxes: \$ 110.93
Legal Description BULPITT 3RD ADD LOTS 1 & 2 BLK 7 150947.000 2002-06480 100X140 12-09-D 67-184634	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,117	0	11,823	0	14,940		
	2024	3,070	0	12,700	0	15,770		

Land Fair Cash Val: 9,210 Building Fair Cash Val: 38,100 **Non-Farm Value: 47,310**

****Required****


Complainant's Estimated Correct Assessed Valuations: _____

Exemption History

Amount

Tax Year
2024

SEN FREEZE 3308

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2002	\$47,500		Yes
04/14/2016	\$15,000	2016R01348	Yes
03/30/2018	\$38,000	2018R00943	No
08/17/2020	\$38,000	2020R03105	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-206-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-207-001-00 310 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RIDGEWAY CINDY S

Address to send notice if different than shown at left:

310 HENRY ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,170** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-207-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 678.74	ESTIMATED			2024 Taxes: \$ 330.07
Legal Description BULPITT EXTENDED LT 12 BLK 6 150902.000 98-04105 50X142 12-09-D 70-196015 96-07453	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	15,370	0	16,945		
	2024	1,550	0	22,620	0	24,170		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 67,860 **Non-Farm Value: 72,510**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
2024	OWNER OCCUPD	6000
	Disabled Person	2000
	IMPROVEMENT	6820
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1998	\$29,000		Yes
10/08/2020	\$20,000	2020R03909	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-207-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-207-002-00 308 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SHUMAKER JACOB

Address to send notice if different than shown at left:

308 HENRY ST
BULPITT

IL 62517

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$27,498 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: ASSESSMENT INCREASED DUE TO REMODELING.

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes rows for 2023 and 2024 data.

Land Fair Cash Val: 4,650 Building Fair Cash Val: 77,844 Non-Farm Value: 82,494

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows 2023 and 2024 entries for OWNER OCCUPD.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows sales from 05/09/2022 and 07/31/2023.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-207-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-207-003-00 306 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

ANDERSON IRIS K

Address to send notice if different than shown at left:

307 GARRISON ST
BULPITT IL 62517

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$1,550 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 4,650 Building Fair Cash Val: 0 Non-Farm Value: 4,650

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-207-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-207-004-00 304 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MORAN WILLIAM & JANA & WILLIAM JR

Address to send notice if different than shown at left:

721 N PINE ST
TAYLORVILLE IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$4,490 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 4,650 Building Fair Cash Val: 8,820 Non-Farm Value: 13,470

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes data for 03/19/2007 sale.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-207-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-207-005-00 302 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ESSWEIN TIMOTHY

Address to send notice if different than shown at left:

302 HENRY ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,666** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-207-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,904.94	ESTIMATED			2024 Taxes: \$ 1,947.50
Legal Description BULPITT EXTENDED LOTS 7 & 8 BLK 6 97-03810 150898.000 98-06991 100X142 12-09-D B232 P483	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,147	0	27,958	0	31,105		
	2024	3,103	0	28,563	0	31,666		

Land Fair Cash Val: 9,309 Building Fair Cash Val: 85,689 **Non-Farm Value: 94,998**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/09/2005	\$63,500	2005R05179	Yes
08/11/2009	\$48,450	2009R04725	No
12/05/2012	\$77,000	2012R06650	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-207-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-207-006-00 303 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KIRCHHOFF ROBERT R & SUNDOWN

303 GARRISON ST
PO BOX 1116
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,683** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-207-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,826.24		ESTIMATED		2024 Taxes: \$ 1,872.91
Legal Description BULPITT EXTENDED LTS 4 5 6 BLK 6 150894.000 2004R05419 150X142 12-09-D 1977R16983 1997R03309	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,562	0	25,506	0	30,068		
	2024	4,493	0	26,190	0	30,683		

Land Fair Cash Val: 13,479 Building Fair Cash Val: 78,570 **Non-Farm Value: 92,049**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-207-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-207-007-00 307 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ANDERSON IRIS K

Address to send notice if different than shown at left:

307 GARRISON ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,570** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-207-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 227.64		ESTIMATED 2024 Taxes: \$ 802.04	
Legal Description BULPITT EXTENDED LT 3 BLK 6 66-179844 150893.000 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,575	0	18,754	0	20,329	
	2024	1,550	0	20,020	0	21,570	

Land Fair Cash Val: 4,650 Building Fair Cash Val: 60,060 **Non-Farm Value: 64,710**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	6329
2024	OWNER OCCUPD	6000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-207-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-207-008-00 309 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WOMACK RYAN R & KATIE M (LSR)
FOR ZACHARY ROZPLOCHOWSKI & BLAZE M

1574 N 1600 EAST RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,413** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-09-207-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 716.52	ESTIMATED			2024 Taxes: \$ 941.88
Legal Description BULPITT EXTENDED LT 2 BLK 6 150892.000 90-03536 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	13,868	0	15,443		
	2024	1,550	0	16,863	0	18,413		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 50,589 **Non-Farm Value: 55,239**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000
<u>Tax Year</u> 2024 Leasehold Owner	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/12/2012	\$7,500	2012R00182	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-207-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-207-009-00 311 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WIX SONJA &
JOSHUA CROWE

311 GARRISON ST
BULPITT IL 62517

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,773** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-207-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 117.46	ESTIMATED			2024 Taxes: \$ 286.06
Legal Description BULPITT EXTENDED LT 1 BLK 6 2002-00929 150891.000 B330 P483 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	12,973	0	14,548		
	2024	1,550	0	16,223	0	17,773		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 48,669 **Non-Farm Value: 53,319**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
2024	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
	IMPROVEMENT	1003

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/16/2024	\$25,000	2024R02778	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-207-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-208-001-00 310 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WARREN KRISTOPHER EVERETT

Address to send notice if different than shown at left:

310 GARRISON ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,570** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-208-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,245.78	ESTIMATED			2024 Taxes: \$ 1,333.19
Legal Description BULPITT EXTENDED LT 12 BLK 5 150890.000 94-5412 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	22,843	0	24,418		
	2024	1,550	0	24,020	0	25,570		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 72,060 **Non-Farm Value: 76,710**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled Person	6000 2000
2024	OWNER OCCUPD Disabled Person	6000 2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1994	\$49,100		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-208-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-208-002-00 308 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WORKMAN CORY & TERRY L JR

Address to send notice if different than shown at left:

308 GARRISON ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,577** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-208-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 271.42
Legal Description BULPITT EXTENDED LT 11 BLK 5 150889.000 93-02668 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	11,374	0	12,949		
	2024	1,550	0	13,027	0	14,577		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 39,081 **Non-Farm Value: 43,731**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD SEN FREEZE IMPROVEMENT	6000 1640 309
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1993	\$20,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-208-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-208-003-00 306 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NOEL JENNIFER J (LSR)
FOR VICKI & KRISTEN SHARER (LSE)

PO BOX 674
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,680** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-208-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 718.72		ESTIMATED 2024 Taxes: \$ 810.38	
Legal Description BULPITT EXTENDED LOT 10 BLK 5 1994R03336 50X142' 150888.000 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,575	0	13,897	0	15,472	
	2024	1,550	0	15,130	0	16,680	

Land Fair Cash Val: 4,650 Building Fair Cash Val: 45,390 **Non-Farm Value: 50,040**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000
<u>Tax Year</u> 2024 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-208-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-208-004-00 304 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ROGGERO NANCY

304 GARRISON ST
PO BOX 828
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,463** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-208-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,222.26		ESTIMATED	2024 Taxes: \$ 1,476.82	
Legal Description BULPITT EXTENDED LT 9 BLK 5 84-1036 150887.000 95-04999 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	14,533	0	16,108		
	2024	1,550	0	17,913	0	19,463		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 53,739 **Non-Farm Value: 58,389**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-208-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-208-005-00 150 EDWARD ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRANDON ROBERT & AMANDA

Address to send notice if different than shown at left:

150 EDWARDS ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$44,050** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-208-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,890.60		ESTIMATED 2024 Taxes: \$ 2,887.18	
Legal Description BULPITT EXTENDED LTS 7 & 8 BLK 5 2000-05986 150885.000 95-04893 100X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,147	0	40,948	0	44,095	
	2024	3,103	0	40,947	0	44,050	

Land Fair Cash Val: 9,309 Building Fair Cash Val: 122,841 **Non-Farm Value: 132,150**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2000	\$66,000		Yes
07/21/2017	\$107,500	2017R02599	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-208-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-208-007-00 303 MAIN ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HODSON LESLIE W & LINDA K

Address to send notice if different than shown at left:

943 E 1025 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,933** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-208-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description BULPITT EXTENDED LT 5 & 6 BLK 5 2000-03568 150883.000 2000-03569 100X142 12-09-D 93-6995 97-01860 2000-03567	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,147	0	4,918	0	8,065		
	2024	3,103	0	6,830	0	9,933		

Land Fair Cash Val: 9,309 Building Fair Cash Val: 20,490 **Non-Farm Value: 29,799**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	2065
	SEN FREEZE	0
2024	OWNER OCCUPD	6000
	ELDERLY	3933
	SEN FREEZE	0

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2000	\$15,000		Yes
11/18/2016	\$14,000	2016R04357	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-208-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-208-008-00 305 MAIN ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BABBS BRADLEY E

Address to send notice if different than shown at left:

305 MAIN ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,430** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-208-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 748.40	ESTIMATED			2024 Taxes: \$ 943.17
Legal Description BULPITT EXTENDED LT 4 BLK 5 150882.000 85-9511 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	14,288	0	15,863		
	2024	1,550	0	16,880	0	18,430		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 50,640 **Non-Farm Value: 55,290**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/2013	\$34,100	2013R00505	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-208-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-208-009-00 307 MAIN ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BABBS BRADLEY

Address to send notice if different than shown at left:

305 MAIN ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,910** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-208-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 226.50		ESTIMATED		2024 Taxes: \$ 220.81
Legal Description BULPITT EXTENDED LT 3 BLK 5 150881.000 2004R05901 50X142 12-09-D 2004R05361 1999R04661 1998R08067 1996R06964	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,534	0	1,451	0	2,985		
	2024	1,550	0	1,360	0	2,910		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 4,080 **Non-Farm Value: 8,730**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1996	\$14,500		Yes
05/03/2005	\$45,000	2005R02526	Yes
11/20/2007	\$49,900	2007R05643	Yes
01/06/2015	\$24,855	2015R00056	No
12/31/2020	\$1,000	2020R05280	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-208-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-208-011-00 311 N MAIN ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JOSEPH REBECCA

Address to send notice if different than shown at left:

311 MAIN ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,964** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-208-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,436.00	ESTIMATED			2024 Taxes: \$ 1,438.96
Legal Description BULPITT EXTENDED LOTS 1 & 2 BLK 5 150879.000 2004R06142 100X142 12-09-D BK259 PG303	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,147	0	21,778	0	24,925		
	2024	3,103	0	26,861	0	29,964		

Land Fair Cash Val: 9,309 Building Fair Cash Val: 80,583 **Non-Farm Value: 89,892**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2004	\$68,000		Yes
07/06/2023	\$89,900	2023R01848	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-208-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-209-001-00 459 EDWARD ST BULPITT

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DENNING DONALD A & LISA

Address to send notice if different than shown at left:

459 EDWARDS ST
BULPITT IL 62517

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$25,427 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 12,771 Building Fair Cash Val: 63,510 Non-Farm Value: 76,281

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Exemption History, Amount, Tax Year. Rows for 2023 and 2024.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Row for 04/01/1991, \$25,000, Yes.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Rows for Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-209-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-209-002-00 460 PARKER ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BURNEY CHARLENE M

Address to send notice if different than shown at left:

PO BOX 272
SHELBY

NE 68662

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,097** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-209-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 785.42		ESTIMATED 2024 Taxes: \$ 1,221.42	
Legal Description BULPITT 2ND ADD EXT W1/2 LTS 7 8 9 & 10 BLK 2 150939.000 60.87X172.3 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,369	0	8,982	0	10,351	
	2024	2,060	0	14,037	0	16,097	

Land Fair Cash Val: 6,180 Building Fair Cash Val: 42,111 **Non-Farm Value: 48,291**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-209-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-209-003-00 450 PARKER ST BULPITT

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BANDY RODNEY R

Address to send notice if different than shown at left:

205 JAMES ST
BULPITT

IL 62517

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$2,033 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 6,099 Building Fair Cash Val: 0 Non-Farm Value: 6,099

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-209-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-209-004-00 201 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BEAVERS DENISE &
DAVID BOURLARD

PO BOX 737
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,060** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-209-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 746.72	ESTIMATED			2024 Taxes: \$ 763.34
Legal Description BULPITT 2ND ADD LT 6 BLK 2 98-05550 150919.000 98-01772 50X140 12-09-D 97-06699 94-05838	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,559	0	8,282	0	9,841		
	2024	1,537	0	8,523	0	10,060		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 25,569 **Non-Farm Value: 30,180**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1998	\$32,000		Yes
06/14/2019	\$16,150	2019R01906	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-209-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-209-005-00 203 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BANDY RODNEY R

Address to send notice if different than shown at left:

205 JAMES ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,594** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-209-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 778.06		ESTIMATED		2024 Taxes: \$ 955.61
Legal Description BULPITT 2ND ADD LT 5 BLK 2 2003R03505QCD 92-3847 150918.000 96-00206 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,559	0	8,695	0	10,254		
	2024	1,537	0	11,057	0	12,594		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 33,171 Non-Farm Value: 37,782

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/1996	\$21,500		Yes
10/30/2006	\$38,500	2006R05440	Yes
09/06/2017	\$25,000	2017R03256	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-209-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-209-006-00 205 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BANDY RODNEY R

Address to send notice if different than shown at left:

205 JAMES ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,077** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-209-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,216.80		ESTIMATED		2024 Taxes: \$ 1,371.66
Legal Description BULPITT 2ND ADD LT 4 BLK 2 150917.000 77-14027 50X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,559	0	20,477	0	22,036		
	2024	1,537	0	22,540	0	24,077		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 67,620 **Non-Farm Value: 72,231**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/31/2007	\$50,000	2007R02656	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-209-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-209-007-00 207 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BANDY RODNEY R

Address to send notice if different than shown at left:

205 JAMES ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,537** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-209-007-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 118.30		ESTIMATED 2024 Taxes: \$ 116.63	
Legal Description BULPITT 2ND ADD LT 3 BLK 2 150916.000 78-19197 50X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,559	0	0	0	1,559	
	2024	1,537	0	0	0	1,537	

Land Fair Cash Val: 4,611 Building Fair Cash Val: 0 **Non-Farm Value: 4,611**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-209-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-209-008-00 209 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARTIN DUSTEN & LAURA

Address to send notice if different than shown at left:

220 W TAYLORVILLE RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,157** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: PROPERTIES COMBINED INTO ONE TAX BILL.

Parcel Number 15-12-09-209-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED 2024 Taxes: \$ 0.00	
Legal Description BULPITT 2ND ADD LT 1 & 2 BLK 2 150915.000 75-1295 100X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,119	0	11,461	0	14,580	
	2024	3,070	0	6,087	0	9,157	

Land Fair Cash Val: 9,210 Building Fair Cash Val: 18,261 **Non-Farm Value: 27,471**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	3580
2024	ELDERLY	3157
	OWNER OCCUPD	6000
	SEN FREEZE	0

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/13/2024	\$7,250	2024R02396	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-209-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-210-001-00 325 EDWARD ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WORKMAN TERRY

325 EDWARD ST
PO BOX 643
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$41,083** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-210-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,197.52	ESTIMATED			2024 Taxes: \$ 2,248.58
Legal Description BULPITT 2ND ADD LTS 11 & 12 BLK 1 150912.000 93-2084 100X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,117	0	31,844	0	34,961		
	2024	3,070	0	38,013	0	41,083		

Land Fair Cash Val: 9,210 Building Fair Cash Val: 114,039 **Non-Farm Value: 123,249**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD IMPROVEMENT	6000 5449

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-210-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-210-002-00 206 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARTEN RICHARD D

Address to send notice if different than shown at left:

PO BOX 132
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,424** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-210-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 941.96	ESTIMATED			2024 Taxes: \$ 1,094.47
Legal Description BULPITT 2ND ADD LT 10 BLK 1 2001-07222 50X140 12-09-D 77-13900 99-04573 150911.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,559	0	16,855	0	18,414		
	2024	1,537	0	18,887	0	20,424		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 56,661 **Non-Farm Value: 61,272**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2001	\$49,750		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-210-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-210-003-00 204 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BANDY HARRY D JR

Address to send notice if different than shown at left:

204 JAMES ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,073** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-210-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,082.42		ESTIMATED		2024 Taxes: \$ 2,433.65
Legal Description BULPITT 2ND ADD LTS 8 & 9 BLK 1 150909.000 B340 P563 100X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,117	0	19,648	0	22,765		
	2024	3,070	0	35,003	0	38,073		

Land Fair Cash Val: 9,210 Building Fair Cash Val: 105,009 **Non-Farm Value: 114,219**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled 30-49% Vete OWNER OCCUPD	2500 6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-210-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-210-004-00 200 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON TODD & AUBRIE

Address to send notice if different than shown at left:

5864 E DIVERNON RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,944** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-210-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,739.82	ESTIMATED			2024 Taxes: \$ 1,892.71
Legal Description BULPITT 2ND ADD LT 7 BLK 1 91-01995 150908.001 96-0685&86 50X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,559	0	21,370	0	22,929		
	2024	1,537	0	23,407	0	24,944		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 70,221 Non-Farm Value: 74,832

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/1996	\$23,000		Yes
07/01/2009	\$47,250	2009R03847	No
06/21/2010	\$45,000	2010R02594	No
02/05/2018	\$55,900	2018R00385	Yes
10/19/2021	\$45,000	2021R04442	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-210-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-210-005-00 300 PARKER ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MICHEL ROBERT L & SHARON (LSR)
FOR NICO NEL (LSE)

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,934** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-210-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 509.60	ESTIMATED			2024 Taxes: \$ 753.78
Legal Description BULPITT 2ND ADD S5.75' OF E88 LOT 5 & ALL LT 6 BLK 1 2001-06226 150908.000 50X140 & 5.75X88 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,703	0	11,013	0	12,716		
	2024	1,677	0	14,257	0	15,934		

Land Fair Cash Val: 5,031 Building Fair Cash Val: 42,771 **Non-Farm Value: 47,802**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000
2024	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-210-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-210-006-00 203 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAVIS KOONCE JENNIFER & WILLIAM

Address to send notice if different than shown at left:

203 HENRY ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,310** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-210-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 82.26	ESTIMATED			2024 Taxes: \$ 251.16
Legal Description BULPITT 2ND ADD LT 5 EX S5.75' OF THE E88'BLK 1 MHRE 150907.000 97-04976 44.25X140 & 5.75X52 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,378	0	5,706	0	7,084		
	2024	1,360	0	7,950	0	9,310		

Land Fair Cash Val: 4,080 Building Fair Cash Val: 23,850 **Non-Farm Value: 27,930**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1997	\$6,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-210-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-210-007-00 205 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BYRNE DOLORES

Address to send notice if different than shown at left:

205 HENRY ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,147** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-210-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 163.38	ESTIMATED			2024 Taxes: \$ 466.43
Legal Description BULPITT 2ND ADD LT 4 BLK 1 150906.000 97-06691 50X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,559	0	14,751	0	16,310		
	2024	1,537	0	15,610	0	17,147		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 46,830 **Non-Farm Value: 51,441**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	3157
2024	OWNER OCCUPD	6000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-210-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-210-008-00 207 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GRAHAM RONALD S & DELLA R

Address to send notice if different than shown at left:

206 HENRY ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,697** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-210-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 99.94	ESTIMATED			2024 Taxes: \$ 128.77
Legal Description BULPITT 2ND ADD LT 3 BLK 1	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
95-05063 150905.000	2023	1,317	0	0	0	1,317		
97-01274 50X140 12-09-D	2024	1,537	0	160	0	1,697		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 480 **Non-Farm Value: 5,091**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/27/2009	\$2,000	2009R04990	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-210-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-210-009-00 209 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WISE GEORGE F & FRANK

Address to send notice if different than shown at left:

209 HENRY ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,817** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-210-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 37.94		ESTIMATED	2024 Taxes: \$ 37.94	
Legal Description BULPITT 2ND ADD LT 2 BLK 1 150904.000 80-30880 50X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,731	0	3,272	0	5,003		
	2024	1,707	0	3,110	0	4,817		

Land Fair Cash Val: 5,121 Building Fair Cash Val: 9,330 **Non-Farm Value: 14,451**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	4503
<u>Tax Year</u> 2024 OWNER OCCUPD	4317

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1980	\$26,250		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-210-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-210-010-00 211 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WISE GEORGE F & FRANK

Address to send notice if different than shown at left:

209 HENRY ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,537** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-210-010-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 118.30		ESTIMATED		2024 Taxes: \$ 116.63
Legal Description BULPITT 2ND ADD LT 1 BLK 1 150903.000 89-8992 50X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,559	0	0	0	1,559		
	2024	1,537	0	0	0	1,537		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 0 **Non-Farm Value: 4,611**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-210-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-211-001-00 208 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SICILIANO PATRICIA J

Address to send notice if different than shown at left:

468 BALSAM CT
MARCO ISLAND FL 34145

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,630** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-211-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,428.72	ESTIMATED			2024 Taxes: \$ 2,627.67
Legal Description BULPITT LTS 11 & 12 BLK 2 78-21069 033980 150854.000 94-4121 100X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,147	0	28,861	0	32,008		
	2024	3,103	0	31,527	0	34,630		

Land Fair Cash Val: 9,309 Building Fair Cash Val: 94,581 **Non-Farm Value: 103,890**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2003	\$55,000		Yes
10/14/2010	\$85,000	2010R04722	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-211-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-211-002-00 206 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GRAHAM RONALD S

Address to send notice if different than shown at left:

206 HENRY ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,503** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-211-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description BULPITT LT 10 BLK 2 150853.000 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	16,858	0	18,433		
	2024	1,550	0	19,953	0	21,503		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 59,859 **Non-Farm Value: 64,509**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	7433
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	10503

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-211-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-211-003-00 204 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WEBB ROBERTA M

Address to send notice if different than shown at left:

204 HENRY ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,917** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-09-211-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,163.00		ESTIMATED		2024 Taxes: \$ 1,966.54
Legal Description BULPITT LT 9 BLK 2 150852.000 86-16409 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	34,931	0	36,506		
	2024	1,550	0	32,367	0	33,917		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 97,101 **Non-Farm Value: 101,751**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled Person	2000
2024	Disabled Person	2000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/02/2010	\$22,500	2010R02324	No
12/06/2010	\$63,900	2010R05748	No
03/01/2019	\$89,000	2019R00630	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-211-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-211-004-00 298 PARKER ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BELOIT ROBERT C

Address to send notice if different than shown at left:

298 PARKER ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,440** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-211-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,888.16		ESTIMATED	2024 Taxes: \$ 1,854.47	
Legal Description BULPITT LOTS 7 & 8 BLK 2 MHRE 150850.000 2004R00205 100X142 12-09-D 2002R03477 1986R12676	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,147	0	27,737	0	30,884		
	2024	3,103	0	27,337	0	30,440		

Land Fair Cash Val: 9,309 Building Fair Cash Val: 82,011 **Non-Farm Value: 91,320**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/31/2013	\$83,000	2013R05714	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-211-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-211-005-00 201 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NALL CRAIG STEPHEN

Address to send notice if different than shown at left:

201 GARRISON ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,757** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-211-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 700.66	ESTIMATED			2024 Taxes: \$ 816.23
Legal Description BULPITT LOT 6 BLK 2 98-03175 150849.000 B232 P511 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	13,659	0	15,234		
	2024	1,550	0	15,207	0	16,757		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 45,621 **Non-Farm Value: 50,271**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1998	\$20,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-211-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-211-006-00 203 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KISKA LEUTRIM

Address to send notice if different than shown at left:

203 GARRISON ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,600** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: ASSESSMENT INCREASED DUE TO REMODELING. MAY QUALIFY FOR IMPROVEMENT EXEMPTION.

Parcel Number 15-12-09-211-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 352.16	ESTIMATED			2024 Taxes: \$ 384.93
Legal Description BULPITT LT 5 BLK 2 150848.000 2002-03179 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	18,224	0	19,799		
	2024	1,550	0	24,050	0	25,600		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 72,150 **Non-Farm Value: 76,800**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 9158
2024	OWNER OCCUPD IMPROVEMENT IMPROVEMENT	6000 9158 5369

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/19/2018	\$10,000	2018R00223	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-211-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-211-007-00 205 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WITTY JUSTIN

Address to send notice if different than shown at left:

205 GARRISON ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,227** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: ASSESSMENT INCREASED DUE TO REMODELING. MAY QUALIFY FOR IMPROVEMENT EXEMPTION.

Parcel Number 15-12-09-211-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 714.70	ESTIMATED			2024 Taxes: \$ 510.21
Legal Description BULPITT LT 4 BLK 2 150847.000 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	27,347	0	28,922		
	2024	1,550	0	24,677	0	26,227		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 74,031 **Non-Farm Value: 78,681**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	13503
2024	IMPROVEMENT	13503

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/31/2016	\$26,000	2016R03184	No
07/05/2017	\$37,590	2017R02426	Yes
11/29/2021	\$75,000	2021R05034	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-211-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-211-008-00 207 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SHEPPARD THOMAS JR

Address to send notice if different than shown at left:

207 GARRISON ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,877** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-211-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 714.02	ESTIMATED			2024 Taxes: \$ 749.45
Legal Description BULPITT LOT 3 BLK 2 2000R00115 50X142' 150846.000 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	13,835	0	15,410		
	2024	1,550	0	14,327	0	15,877		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 42,981 **Non-Farm Value: 47,631**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/22/2013	\$14,000	2013R00287	No
07/01/2019	\$43,900	2019R02096	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-211-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-211-009-00 209 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROWN JESSICA

Address to send notice if different than shown at left:

209 GARRISON ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,860** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-211-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,225.44	ESTIMATED			2024 Taxes: \$ 1,203.43
Legal Description BULPITT LT 2 BLK 2 150845.000 2002-03933 50X142 12-09-D B221 P22	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	20,575	0	22,150		
	2024	1,550	0	20,310	0	21,860		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 60,930 **Non-Farm Value: 65,580**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/24/2018	\$54,000	2018R03124	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-211-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-211-010-00 211 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

CURVEY BERNARD A & JANE E (LSR)
FOR ERIC & DELORES STEGALL (LSE)

PO BOX 677
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property,
appeals this assessment of said property at \$14,747 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 4,650 Building Fair Cash Val: 39,591 Non-Farm Value: 44,241

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year 2024. Includes Leasehold Owner with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes data for 07/30/2007 sale at \$18,000.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-211-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-212-001-00 210 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROWN ALBERT

PO BOX 691
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,550** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-212-001-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 119.52		ESTIMATED 2024 Taxes: \$ 117.61	
Legal Description BULPITT LT 12 BLK 1 150843.000 2004R02145 50X142 12-09-D 2000R01069 92-7314	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,575	0	0	0	1,575	
	2024	1,550	0	0	0	1,550	

Land Fair Cash Val: 4,650 Building Fair Cash Val: 0 **Non-Farm Value: 4,650**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2004	\$4,500		Yes
10/25/2012	\$2,500	2012R05893	No
09/28/2018	\$3,000	2018R03233	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-212-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-212-002-00 208 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ANDERS STEVE &
JADE OLLER

208 GARRISON ST
BULPITT IL 62517

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,720** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-212-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,305.50		ESTIMATED		2024 Taxes: \$ 1,496.32
Legal Description BULPITT LT 11 BLK 1 150842.000 2000-05844 50X142 12-09-D 76-8909	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	21,630	0	23,205		
	2024	1,550	0	24,170	0	25,720		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 72,510 **Non-Farm Value: 77,160**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2000	\$44,500		Yes
02/22/2016	\$35,000	2016R00648	Yes
05/30/2019	\$70,000	2019R01662	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-212-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-212-003-00 206 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF BULPITT

Address to send notice if different than shown at left:

PO BOX 47
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: A REVALUATION OF PROPERTY.

Parcel Number 15-12-09-212-003-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 60.32	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description BULPITT LOT 10 BLK 1 150841.000 77-17365 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	556	0	239	0	795		
	2024	0	0	0	0	0		

15-12-09-212-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-212-004-00 204 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WILLIAMS CHRISTOPHER J

Address to send notice if different than shown at left:

PO BOX 163
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,343** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-212-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 264.90	ESTIMATED			2024 Taxes: \$ 405.42
Legal Description BULPITT LT 9 BLK 1 98-04253 150840.000 2000-02454 50X142 12-09-D 94-3679	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	1,916	0	3,491		
	2024	1,550	0	3,793	0	5,343		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 11,379 **Non-Farm Value: 16,029**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1998	\$18,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-212-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-212-005-00 202 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COLEMAN TINA M

Address to send notice if different than shown at left:

202 GARRISON ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,200** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-212-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,328.86		ESTIMATED		2024 Taxes: \$ 1,305.11
Legal Description BULPITT LT 8 BLK 1 150839.000 97-05195 50X142 12-09-D		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	1,575	0	21,938	0	23,513	
		2024	1,550	0	21,650	0	23,200	

Land Fair Cash Val: 4,650 Building Fair Cash Val: 64,950 **Non-Farm Value: 69,600**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/30/2008	\$58,000	2008R00489	No
05/16/2014	\$43,000	2014R01807	Yes
12/11/2017	\$57,325	217R04425	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-212-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-212-006-00 200 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOORE AUSTIN & KELSEY

APT A
458 WESTCREST DR
NASHVILLE TN 37211

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,027** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-212-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 577.14	ESTIMATED			2024 Taxes: \$ 988.47
Legal Description BULPITT LT 7 BLK 1 98-07820 150838.000 78-23492 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	12,031	0	13,606		
	2024	1,550	0	17,477	0	19,027		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 52,431 **Non-Farm Value: 57,081**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/22/2018	\$22,000	2018R00549	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-212-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-212-007-00 201 MAIN ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COGHLANS HIDEOUT LLC

646 E 1930 NORTH RD
EDINBURG IL 62531

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,818** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-212-007-00	Class 0060	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,564.24		ESTIMATED		2024 Taxes: \$ 2,641.94
Legal Description BULPITT LT 6 & S20 LT 5 BLK 1 70X142 80-31917 98-06310 98-06311 99-08085 2000-04897 2000-04896 2000-03541	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,178	0	31,616	0	33,794		
	2024	2,243	0	32,575	0	34,818		

Land Fair Cash Val: 6,729 Building Fair Cash Val: 97,725 **Non-Farm Value: 104,454**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2000	\$15,000		Yes
11/14/2023	\$100,000	2023R03350	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ____ / ____ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-212-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-212-010-00 207 MAIN ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COGHLANS HIDEOUT LLC

646 E 1930 NORTH RD
EDINBURG IL 62531

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,052** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-212-010-00	Class 0063	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 79.82		ESTIMATED	2024 Taxes: \$ 79.82
Legal Description BULPITT S3 LT 4 & N30 LT 5 BLK 1 150834.000 91-05132 33X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,052	0	0	0	1,052	
	2024	1,052	0	0	0	1,052	

Land Fair Cash Val: 3,156 Building Fair Cash Val: 0 Non-Farm Value: 3,156

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
02/01/1983	\$45,000		Yes
09/09/2016	\$5,000	2016R03351	Yes
11/14/2023	\$100,000	2023R03350	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-212-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-212-011-00 209 MAIN ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COGHLANS HIDEOUT LLC

Address to send notice if different than shown at left:

646 E 1930 NORTH RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,499** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-212-011-00	Class 0063	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 113.74		ESTIMATED	2024 Taxes: \$ 113.74	
Legal Description BULPITT N47 LT 4 BLK 1 150833.000 86-12396 47X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,499	0	0	0	1,499		
	2024	1,499	0	0	0	1,499		

Land Fair Cash Val: 4,497 Building Fair Cash Val: 0 Non-Farm Value: 4,497

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
03/01/2016	\$15,000	2016R00735	No
11/14/2023	\$100,000	2023R03350	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-212-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-212-012-00 211 MAIN ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COGHLANS HIDEOUT LLC

646 E 1930 NORTH RD
EDINBURG IL 62531

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,550** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-212-012-00	Class 0063	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 119.52		ESTIMATED 2024 Taxes: \$ 117.61	
Legal Description BULPITT LT 3 BLK 1 150831.000 86-12396 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,575	0	0	0	1,575	
	2024	1,550	0	0	0	1,550	

Land Fair Cash Val: 4,650 Building Fair Cash Val: 0 Non-Farm Value: 4,650

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/2016	\$15,000	2016R00735	No
11/14/2023	\$100,000	2023R03350	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-212-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-212-013-00 213 MAIN ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COGHLANS HIDEOUT LLC

646 E 1930 NORTH RD
EDINBURG IL 62531

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,306** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-212-013-00	Class 0063	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 99.10		ESTIMATED	2024 Taxes: \$ 99.10	
Legal Description BULPITT S41 LOT 2 BLK 1 150830.000 41X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,306	0	0	0	1,306		
	2024	1,306	0	0	0	1,306		

Land Fair Cash Val: 3,918 Building Fair Cash Val: 0 Non-Farm Value: 3,918

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
03/01/2016	\$15,000	2016R00735	No
11/14/2023	\$100,000	2023R03350	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-212-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-212-014-00 215 MAIN ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WOODSON JERRY

Address to send notice if different than shown at left:

215 MAIN ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,593** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-212-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 820.86		ESTIMATED 2024 Taxes: \$ 955.54	
Legal Description BULPITT LT 1 & N 9 LT 2 BLK 1 95-00721 150829.000 95-00722 59X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,858	0	14,960	0	16,818	
	2024	1,830	0	16,763	0	18,593	

Land Fair Cash Val: 5,490 Building Fair Cash Val: 50,289 **Non-Farm Value: 55,779**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/1992	\$30,000		Yes
06/07/2011	\$45,000	2011R02468	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-212-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-213-001-00 475 PARKER ST BULPITT

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BURNEY CHARLENE

Address to send notice if different than shown at left:

PO BOX 272
SHELBY

NE 68662

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$3,567 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 3,891 Building Fair Cash Val: 6,810 Non-Farm Value: 10,701

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes red arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes entry for 02/01/1998 at \$5,000.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-213-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-213-003-00 101 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEES JASON & MINDY

Address to send notice if different than shown at left:

PO BOX 1095
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,665** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-213-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,127.78	ESTIMATED			2024 Taxes: \$ 809.24
Legal Description BULPITT 2ND ADD LOTS 4 5 & 6 BLK 3 & BULPITT 2ND ADD EXT LOTS 7 THRU 12 BLK 3 138X140 & 259X121AV 12-09-D 1973R08984 150923.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,146	0	26,896	0	34,042		
	2024	7,043	0	9,622	0	16,665		

Land Fair Cash Val: 21,129 Building Fair Cash Val: 28,866 **Non-Farm Value: 49,995**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/10/2024	\$50,000	2024R02003	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-213-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-213-004-00 107 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

OLLER PATRICIA MARIE

Address to send notice if different than shown at left:

107 JAMES ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,220** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-213-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 94.32		ESTIMATED 2024 Taxes: \$ 92.57	
Legal Description BULPITT 2ND ADD LT 3 BLK 3 150922.000 50X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,013	0	230	0	1,243	
	2024	997	0	223	0	1,220	

Land Fair Cash Val: 2,991 Building Fair Cash Val: 669 **Non-Farm Value: 3,660**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-213-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-213-005-00 109 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOUTREY JEAN V &
JOSEPH J WENGLARZ

109 JAMES ST
BULPITT IL 62517

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,200** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-213-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 218.76		ESTIMATED		2024 Taxes: \$ 218.76
Legal Description BULPITT 2ND ADD LT 2 BLK 3 150921.000 2004R06350 50X140 12-09-D 2004R01981 2003R05713 96-00748 94-5339	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,559	0	16,907	0	18,466		
	2024	1,537	0	17,663	0	19,200		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 52,989 **Non-Farm Value: 57,600**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	4583
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	5317

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/1996	\$55,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-213-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-213-006-00 111 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JIMENEZ LOUIE RIVERA

Address to send notice if different than shown at left:

204 JAMES ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,517** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-213-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 307.84	ESTIMATED			2024 Taxes: \$ 621.98
Legal Description BULPITT 2ND ADD LT 1 BLK 3 93-03509 150920.000 87-19405 50X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,559	0	2,498	0	4,057		
	2024	1,537	0	9,980	0	11,517		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 29,940 **Non-Farm Value: 34,551**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/26/2007	\$40,000	2007R00857	Yes
01/21/2015	\$11,000	2015R00211	No
05/03/2024	\$15,000	2024R01243	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-213-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-214-001-00 108 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DENNING RENEE D

Address to send notice if different than shown at left:

108 JAMES ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,630** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-214-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 895.82	ESTIMATED			2024 Taxes: \$ 1,110.10
Legal Description BULPITT 2ND ADD LOTS 11 & 12 BLK 4 150936.000 100X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,117	0	14,689	0	17,806		
	2024	3,070	0	17,560	0	20,630		

Land Fair Cash Val: 9,210 Building Fair Cash Val: 52,680 **Non-Farm Value: 61,890**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-214-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-214-002-00 106 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SEXSON AMANDA &
JOHN GRIFFITHS

PO BOX 492
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,537** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-214-002-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 118.30		ESTIMATED 2024 Taxes: \$ 116.63	
Legal Description BULPITT 2ND ADD LOT 10 BLK 4 2001R00722 50X140' 150935.000 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,559	0	0	0	1,559	
	2024	1,537	0	0	0	1,537	

Land Fair Cash Val: 4,611 Building Fair Cash Val: 0 **Non-Farm Value: 4,611**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/06/2013	\$32,000	2013R05384	No
11/29/2022	\$18,000	2022R04280	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-214-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-214-003-00 104 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SEXSON AMANDA &
JOHN GRIFFITHS

PO BOX 492
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,670** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: A REVALUATION OF PROPERTY.

Parcel Number 15-12-09-214-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 518.56		ESTIMATED	2024 Taxes: \$ 506.11
Legal Description BULPITT 2ND ADD LOT 9 BLK 4 2001R00722 50X140 150934.000 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,559	0	5,275	0	6,834	
	2024	1,537	0	5,133	0	6,670	

Land Fair Cash Val: 4,611 Building Fair Cash Val: 15,399 **Non-Farm Value: 20,010**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/06/2013	\$32,000	2013R05384	No
11/29/2022	\$18,000	2022R04280	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-214-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-214-004-00 102 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SEXSON AMANDA &
JOHN GRIFFITHS

PO BOX 492
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,537** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-214-004-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 118.30		ESTIMATED		2024 Taxes: \$ 116.63
Legal Description BULPITT 2ND ADD LOT 8 BLK 4 2001R00722 50X140' 150933.000 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,559	0	0	0	1,559		
	2024	1,537	0	0	0	1,537		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 0 Non-Farm Value: 4,611

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/06/2013	\$32,000	2013R05384	No
11/29/2022	\$18,000	2022R04280	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-214-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-214-005-00 100 JAMES ST BULPITT

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

GRIFFITHS JOHN E & AMANDA S SEXSON

PO BOX 492 KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$2,527 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for Year, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 4,470 Building Fair Cash Val: 3,111 Non-Farm Value: 7,581

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Includes rows for 08/04/2009 and 01/08/2018)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-214-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-214-006-00 101 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GRIFFITHS JOHN E &
SEXSON AMANDA S

PO BOX 492
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,857** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-214-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,152.00		ESTIMATED		2024 Taxes: \$ 1,354.96
Legal Description BULPITT 2ND ADD LT 6 BLK 4 150931.000 95-4249 49.5X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,542	0	19,640	0	21,182		
	2024	1,520	0	22,337	0	23,857		

Land Fair Cash Val: 4,560 Building Fair Cash Val: 67,011 **Non-Farm Value: 71,571**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/21/2006	\$45,000	2006R05878	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-214-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-214-007-00 103 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GRIFFITHS JOHN E &
SEXSON AMANDA S

PO BOX 492
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,450** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-214-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 112.00	ESTIMATED			2024 Taxes: \$ 110.02
Legal Description BULPITT 2ND ADD LT 5 BLK 4 150930.000 95-04249 45X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,402	0	74	0	1,476		
	2024	1,383	0	67	0	1,450		

Land Fair Cash Val: 4,149 Building Fair Cash Val: 201 **Non-Farm Value: 4,350**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/21/2006	\$45,000	2006R05878	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-214-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-214-008-00 107 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BANDY HARRY D SR & MARY H

Address to send notice if different than shown at left:

107 HENRY ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,773** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-214-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,520.54	ESTIMATED			2024 Taxes: \$ 1,879.74
Legal Description BULPITT 2ND ADD LOTS 2 3 & 4 BLK 4 150928.000 70-196420 145X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,516	0	26,523	0	31,039		
	2024	4,453	0	31,320	0	35,773		

Land Fair Cash Val: 13,359 Building Fair Cash Val: 93,960 **Non-Farm Value: 107,319**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/28/2010	\$60,000	2010R02239	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-214-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-214-009-00 111 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

METSKER TIMOTHY & KIMBERLY

Address to send notice if different than shown at left:

890 N 1900 EAST RD
OWANECO IL 62555

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,047** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-214-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 591.02	ESTIMATED			2024 Taxes: \$ 610.59
Legal Description BULPITT 2ND ADD LT 1 BLK 4 97-03905 150926.000 69-190978 50X140 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,559	0	6,230	0	7,789		
	2024	1,537	0	6,510	0	8,047		

Land Fair Cash Val: 4,611 Building Fair Cash Val: 19,530 **Non-Farm Value: 24,141**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1997	\$23,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-214-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-215-001-00 110 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LEE EVELYN MARGIE & HUBERT

Address to send notice if different than shown at left:

110 HENRY ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,590** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-215-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description BULPITT LT 12 BLK 3 150867.000 82-43249 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	19,385	0	20,960		
	2024	1,550	0	20,040	0	21,590		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 60,120 **Non-Farm Value: 64,770**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	9960
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	10590

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1982	\$17,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-215-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-215-002-00 108 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DURHAM RONALD D

Address to send notice if different than shown at left:

108 HENRY ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,280** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-215-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 476.30	ESTIMATED			2024 Taxes: \$ 552.40
Legal Description BULPITT LT 11 BLK 3 150866.000 2002-07307 50X142 12-09-D 85-10972	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	15,702	0	17,277		
	2024	1,550	0	16,730	0	18,280		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 50,190 **Non-Farm Value: 54,840**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY OWNER OCCUPD	5000 6000
2024	ELDERLY OWNER OCCUPD	5000 6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2002	\$45,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-215-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-215-003-00 106 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RILEY DAVID A

Address to send notice if different than shown at left:

205 N CHESTNUT ST
ASSUMPTION IL 62510

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,998** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-215-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,268.62		ESTIMATED	2024 Taxes: \$ 1,972.69	
Legal Description BULPITT LT 10 BLK 3 89-6919 150865.000 84-5300 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	15,144	0	16,719		
	2024	1,550	0	24,448	0	25,998		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 73,344 **Non-Farm Value: 77,994**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1984	\$15,000		Yes
04/11/2022	\$78,000	2022R01321	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-215-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-215-004-00 104 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARLOW KELSEY M

Address to send notice if different than shown at left:

104 HENRY ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,437** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-215-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 878.76	ESTIMATED			2024 Taxes: \$ 943.70
Legal Description BULPITT N45 LT 9 BLK 3 150864.000 81-36702 45X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,415	0	16,166	0	17,581		
	2024	1,397	0	17,040	0	18,437		

Land Fair Cash Val: 4,191 Building Fair Cash Val: 51,120 **Non-Farm Value: 55,311**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1981	\$11,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-215-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-215-005-00 102 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREGORY MARC S & MELANIE S

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,914** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-215-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,089.32		ESTIMATED	2024 Taxes: \$ 979.89
Legal Description BULPITT N40 LT 8 & S5 LT 9 BLK 3 150863.000 B204 P221 45X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,415	0	12,941	0	14,356	
	2024	1,397	0	11,517	0	12,914	

Land Fair Cash Val: 4,191 Building Fair Cash Val: 34,551 **Non-Farm Value: 38,742**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/31/2007	\$39,000	2007R04290	Yes
04/16/2018	\$35,000	2018R01118	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-215-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-215-006-00 100 HENRY ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SHEPPARD BRIANA &
AMY HARWOOD

100 HENRY ST
BULPITT

IL 62517

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,333** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-215-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 67.92	ESTIMATED			2024 Taxes: \$ 37.94
Legal Description BULPITT N40 LT 7 & S10 LT 8 BLK 3 150862.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
98-00022 50X142 12-09-D	2023	1,575	0	5,320	0	6,895		
	2024	1,550	0	3,783	0	5,333		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 11,349 **Non-Farm Value: 15,999**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	4833

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/10/2009	\$15,000	2009R06282	No
12/06/2022	\$16,000	2022R04386	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-215-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-215-007-00 101 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KIRCHHOFF ROSCOE & LAURIE E

Address to send notice if different than shown at left:

101 GARRISON ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,147** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-09-215-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,277.96	ESTIMATED			2024 Taxes: \$ 1,680.48
Legal Description BULPITT LOT 6 BLK 3 2004R01648 1999R02597 1993R05950 BK215 PG328 64X142'AV 150861.000 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,014	0	25,309	0	27,323		
	2024	1,987	0	28,160	0	30,147		

Land Fair Cash Val: 5,961 Building Fair Cash Val: 84,480 **Non-Farm Value: 90,441**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	IMPROVEMENT	2481
2024	OWNER OCCUPD	6000
	Disabled Person	2000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/2004	\$30,000		Yes
07/24/2006	\$33,000	2006R03549	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-215-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-215-008-00 103 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BATTY BRENNNA &
BRYCE BARTON

103 GARRISON ST
BULPITT IL 62517

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,665** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-09-215-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 979.52		ESTIMATED 2024 Taxes: \$ 1,340.39	
Legal Description BULPITT LT 5 BLK 3 150860.000 2001-04474 50X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,575	0	17,334	0	18,909	
	2024	1,550	0	22,115	0	23,665	

Land Fair Cash Val: 4,650 Building Fair Cash Val: 66,345 **Non-Farm Value: 70,995**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2001	\$54,000		Yes
07/06/2021	\$71,000	2021R02750	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-215-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-215-009-00 105 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SAUNDERS TOMMY M & SARAH G

Address to send notice if different than shown at left:

107 GARRISON ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,000** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-215-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description BULPITT LT 4 BLK 3	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
2000-02339 50X142 12-09-D 93-05950 97-03949 150859.000	2023	1,575	0	4,209	0	5,784	
	2024	803	0	197	0	1,000	

Land Fair Cash Val: 2,409 Building Fair Cash Val: 591 **Non-Farm Value: 3,000**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY SEN FREEZE	5284 500 0
2024	OWNER OCCUPD ELDERLY	500 500

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2000	\$18,000		Yes
07/02/2010	\$20,000	2010R02811	No
09/16/2024	\$3,000	2024R02777	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-215-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-215-010-00 107 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SAUNDERS TOMMY M & SARAH G

Address to send notice if different than shown at left:

107 GARRISON ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,633** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-215-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 964.26	ESTIMATED			2024 Taxes: \$ 997.73
Legal Description BULPITT S40 LT 3 BLK 3 150858.000 2003R03856 40X142 12-09-D 89-09374	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,259	0	17,449	0	18,708		
	2024	1,240	0	24,393	0	25,633		

Land Fair Cash Val: 3,720 Building Fair Cash Val: 73,179 **Non-Farm Value: 76,899**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD IMPROVEMENT	6000 6484

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2003	\$30,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-215-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-215-011-00 109 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BARTLETT JORDAN R

Address to send notice if different than shown at left:

109 GARRISON ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,331** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-215-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,594.90	ESTIMATED			2024 Taxes: \$ 1,390.93
Legal Description BULPITT LT 2 & N10' LOT 3 BLK 3 2004R00591 150857.000 B17 P223 60X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,887	0	25,132	0	27,019		
	2024	1,860	0	22,471	0	24,331		

Land Fair Cash Val: 5,580 Building Fair Cash Val: 67,413 **Non-Farm Value: 72,993**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/2004	\$10,000		Yes
01/18/2005	\$64,000	2005R00296	Yes
01/11/2016	\$16,500	2016R00104	No
07/28/2016	\$69,900	2016R02729	No
07/06/2021	\$73,000	2021R02739	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-215-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-215-012-00 225 PARKER ST BULPITT

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SENF DOUGLAS J

Address to send notice if different than shown at left:

225 PARKER ST
BULPITT

IL 62517

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$12,427 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024 valuations.

Land Fair Cash Val: 4,650 Building Fair Cash Val: 32,631 Non-Farm Value: 37,281

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Lists exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Lists sales history for the property.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Includes fields for dollar amounts and initials for Joy, Ed, and Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-215-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-216-002-00 108 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DYLAN A

718 E 1400 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,556** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-216-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,381.38		ESTIMATED	2024 Taxes: \$ 1,559.76	
Legal Description BULPITT LOT 6 & 7 BLK 4 2000-01410 150877.000 91-05662 100X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,147	0	15,058	0	18,205		
	2024	3,103	0	17,453	0	20,556		

Land Fair Cash Val: 9,309 Building Fair Cash Val: 52,359 **Non-Farm Value: 61,668**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1991	\$28,500		Yes
10/20/2015	\$40,000	2015R04039	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-216-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-216-003-00 106 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FOLI DENNIS

Address to send notice if different than shown at left:

PO BOX 708
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,533** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-216-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 143.64	ESTIMATED			2024 Taxes: \$ 192.20
Legal Description BULPITT LT 5 BLK 4 150876.000 87-24092 49X142 12-09-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,542	0	351	0	1,893		
	2024	1,520	0	1,013	0	2,533		

Land Fair Cash Val: 4,560 Building Fair Cash Val: 3,039 **Non-Farm Value: 7,599**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/21/2023	\$7,600	2023R02671	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-216-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-216-004-00 102 GARRISON ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HENRIKSON STEPHEN G

Address to send notice if different than shown at left:

57 BROOKSIDE PL
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,703** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-216-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 772.38	ESTIMATED			2024 Taxes: \$ 888.01
Legal Description BULPITT BEG SW COR LOT 3 BLK 4 ORIGINAL TOWN OF BULPITT S5.99 W40.92' TO POB S46.19' W117.02' N46.19' E117.12' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,932	0	7,247	0	10,179		
	2024	2,890	0	8,813	0	11,703		

Land Fair Cash Val: 8,670 Building Fair Cash Val: 26,439 **Non-Farm Value: 35,109**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/22/2005	\$2,500	2005R06596	Yes
08/01/2011	\$35,000	2011R03285	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-216-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-216-005-00 101 S MAIN ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HENRIKSON STEPHEN G

Address to send notice if different than shown at left:

57 BROOKSIDE PL
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$51,840** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-216-005-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 4,063.60		ESTIMATED 2024 Taxes: \$ 3,933.54	
Legal Description BULPITT BEG SE COR LOT 3 BLK 4 ORIGINAL TOWN OF BULPITT S60.04' POB S166.20' NWLY306.27' N73.06' E116.91' N36.89' E183.03' TO BEG &	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	6,005	0	47,549	0	53,554	
	2024	5,920	0	45,920	0	51,840	

Land Fair Cash Val: 17,760 Building Fair Cash Val: 137,760 **Non-Farm Value: 155,520**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/30/2007	\$12,000	2007R03731	No
03/05/2013	\$15,000	2013R01008	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-216-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-216-005-01 105 S MAIN ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JONES JACOB M

409 WALNUT ST
PO BOX 25
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,146** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-216-005-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,053.58		ESTIMATED		2024 Taxes: \$ 1,301.01
Legal Description BULPITT BEG SE COR LOT 3 BLK 4 ORIGINAL TOWN OF BUILPITT S65.04' W183.03' N59.19' E40.92' N5.99' E142.17' TO POB 2003R03820 5.99X142.17' &	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,498	0	11,387	0	13,885		
	2024	2,463	0	14,683	0	17,146		

Land Fair Cash Val: 7,389 Building Fair Cash Val: 44,049 **Non-Farm Value: 51,438**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
05/01/2003	\$25,000	2003R03820	Yes
07/28/2006	\$30,200	2006R03651	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-216-005-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-216-006-00 107 MAIN ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIGGASON JON M

Address to send notice if different than shown at left:

PO BOX 824
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,550** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-216-006-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 119.52		ESTIMATED		2024 Taxes: \$ 117.61
Legal Description BULPITT LT 3 BLK 4 115871.000 2004R04620 50X142 12-09-D 2001R03612 94-04896 2002-05207	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	0	0	1,575		
	2024	1,550	0	0	0	1,550		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 0 Non-Farm Value: 4,650

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2004	\$5,000		Yes
08/13/2018	\$4,000	2018R02643	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-216-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-216-008-00 111 N MAIN ST BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIGGASON JON

Address to send notice if different than shown at left:

PO BOX 824
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,597** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-216-008-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,371.66		ESTIMATED		2024 Taxes: \$ 1,411.11
Legal Description BULPITT S5 LT 1 & LT 2 BLK 4 2003R07131 97-07038 150869.000 99-06892 55X142 12-09-D 97-05195 2002-05207	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,731	0	16,346	0	18,077		
	2024	1,707	0	16,890	0	18,597		

Land Fair Cash Val: 5,121 Building Fair Cash Val: 50,670 **Non-Farm Value: 55,791**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1999	\$900		Yes
11/08/2007	\$12,400	2007R05464	No
01/05/2018	\$4,000	2018R00063	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-216-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-216-009-00 101 PARKER ST BULPITT

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HIGGASON JON & DEBRA

Address to send notice if different than shown at left:

PO BOX 824
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$16,733 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 2,310 Building Fair Cash Val: 47,889 Non-Farm Value: 50,199

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes sales from 1989, 2009, and 2019.

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-216-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-300-001-00 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$51,360** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-300-001-00	Class 0083	Acreage 58.230	Print Date 9/23/2024	2023 Taxes: \$ 3,679.16		ESTIMATED	2024 Taxes: \$ 3,789.61
Legal Description SW1/4 SANGCHRIS LAKE 58.230AC FOR SANGCHRIS LAKE 98-01242 150072.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	49,863	0	0	0	49,863	
	2024	51,360	0	0	0	51,360	

Land Fair Cash Val: 154,080 Building Fair Cash Val: 0 **Non-Farm Value: 154,080**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-300-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-300-001-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ZAUBI STEPHEN

Address to send notice if different than shown at left:

301 N OLD COVERED BRIDGE LN
 SPRINGFIELD IL 62711

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,003** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-300-001-02	Class 0021	Acreage 49.150	Print Date 9/23/2024	2023 Taxes: \$ 415.20		ESTIMATED		2024 Taxes: \$ 442.93
Legal Description FARM TRACT #17 SW1/4 LY S&W OF SANGCHRIS LAKE EX 8.30AC 98-02544	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	5,627	0	0	5,627		
	2024	0	6,003	0	0	6,003		

15-12-09-300-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-300-001-04

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$565** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-300-001-04	Class 0083	Acreage 1.591	Print Date 9/23/2024	2023 Taxes: \$ 40.30		ESTIMATED	2024 Taxes: \$ 41.69
Legal Description BEG NW COR SW1/4 SW1/4 E175 NELY209.45 TO WATER EDGE SELY 181.97 SWLY376.17 W237.94 N150 DITCH TR #3 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	546	0	0	0	546	
	2024	565	0	0	0	565	

Land Fair Cash Val: 1,695 Building Fair Cash Val: 0 **Non-Farm Value: 1,695**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-300-001-04

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-001-00 1 LAKE POINT DR KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LAREAU KELLY & LEIGH ANN

Address to send notice if different than shown at left:

PO BOX 1132
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$64,330** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-301-001-00	Class 0040	Acreage 0.700	Print Date 9/23/2024	2023 Taxes: \$ 4,569.72		ESTIMATED	2024 Taxes: \$ 4,677.49	
Legal Description FINES COVE SUBDIV PART OF LOT 1 2001R02919 1999R01505 1998R01638 12-09-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	12,848	0	50,138	0	62,986		
	2024	14,067	0	50,263	0	64,330		

Land Fair Cash Val: 42,201 Building Fair Cash Val: 150,789 **Non-Farm Value: 192,990**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2001	\$140,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-301-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-002-00 2 LAKE POINT DR KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LAREAU KELLY & LEIGH ANN

PO BOX 1132
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,957** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-301-002-00	Class 0030	Acreage 1.050	Print Date 9/23/2024	2023 Taxes: \$ 915.78	ESTIMATED			2024 Taxes: \$ 958.83
Legal Description FINES COVE SUBDIV LOT 2 1999R04346 1998R01638 12-09-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	11,420	0	0	0	11,420		
	2024	11,957	0	0	0	11,957		

Land Fair Cash Val: 35,871 Building Fair Cash Val: 0 **Non-Farm Value: 35,871**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1999	\$20,000		Yes
04/15/2005	\$31,000	2005R02130	Yes
02/01/2013	\$27,000	2013R00511	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-301-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-003-00 4 LAKE POINT DR KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HUDDLESTON DONALD E & SHARRI L CO TRI

4 LAKE POINT DR
PO BOX 152
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$82,666** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-301-003-00	Class 0040	Acreage 1.660	Print Date 9/23/2024	2023 Taxes: \$ 6,534.46		ESTIMATED	2024 Taxes: \$ 5,746.91	
Legal Description FINES COVE SUBDIV LOTS 3 & 4 1999R03885 1998R05759 1998R01638 12-09-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	24,268	0	68,219	0	92,487		
	2024	21,803	0	60,863	0	82,666		

Land Fair Cash Val: 65,409 Building Fair Cash Val: 182,589 **Non-Farm Value: 247,998**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2016	\$240,000	2016R03199	Yes
06/03/2021	\$200,000	2021R02306	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-301-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-005-00 5 LAKE POINT DR KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

POP DANIEL J & TANIA K

5 LAKE POINT DR
PO BOX 122
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$83,296** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-301-005-00	Class 0040	Acreage 1.320	Print Date 9/23/2024	2023 Taxes: \$ 6,297.18		ESTIMATED	2024 Taxes: \$ 6,198.38	
Legal Description FINES COVE SUBDIV LOT 5 2001R07797 1998R05804 12-09-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	19,984	0	64,544	0	84,528		
	2024	19,693	0	63,603	0	83,296		

Land Fair Cash Val: 59,079 Building Fair Cash Val: 190,809 **Non-Farm Value: 249,888**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-301-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-006-00 6 LAKE POINT DR KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HEIPLE LOREN C & JESSE L

6 LAKE POINT DR
PO BOX 172
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$67,523** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-301-006-00	Class 0040	Acreage 1.010	Print Date 9/23/2024	2023 Taxes: \$ 4,710.30	ESTIMATED			2024 Taxes: \$ 4,532.59
Legal Description FINES COVE SUBDIV LOT 6 & SELY 1/2 LOT 7 2001R06881 2001R02510 2001R01881 2000R06858 1998R01638 12-09-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	14,274	0	55,465	0	69,739		
	2024	15,473	0	52,050	0	67,523		

Land Fair Cash Val: 46,419 Building Fair Cash Val: 156,150 **Non-Farm Value: 202,569**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY OWNER OCCUPD	5000 6000
2024	ELDERLY OWNER OCCUPD	5000 6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-301-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-008-00 8 LAKE POINT DR KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CRAIN JAMES L & LOU ANN

PO BOX 632
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$88,700** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-301-008-00	Class 0040	Acreage 1.130	Print Date 9/23/2024	2023 Taxes: \$ 6,440.80		ESTIMATED		2024 Taxes: \$ 6,631.73
Legal Description FINES COVE SUBDIV NELY 1/2 LOT 7 & ALL LOT 8 2004R02293 2001R06530 1998R01638 12-09-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,383	0	78,936	0	86,319		
	2024	10,550	0	78,150	0	88,700		

Land Fair Cash Val: 31,650 Building Fair Cash Val: 234,450 **Non-Farm Value: 266,100**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
09/01/2001	\$13,500		Yes
10/06/2015	\$20,000	2015R03878	Yes
05/08/2017	\$20,000	2017R01664	Yes
04/12/2019	\$18,000	2019R01112	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-301-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-009-00 600 BROCCARDO CT RD KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DULAKIS STEVE & KELLY

600 BROCCARDO CT RD
PO BOX 912
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$65,290 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 31,650 Building Fair Cash Val: 164,220 Non-Farm Value: 195,870

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows 2023 and 2024 data for OWNER OCCUPD with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes handwritten values and initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-301-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-010-00 3 FINES POINT RD KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WATSON THOMAS L & LISSA M

Address to send notice if different than shown at left:

PO BOX 436
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$68,294** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-301-010-00	Class 0040	Acreage 0.750	Print Date 9/23/2024	2023 Taxes: \$ 4,933.78	ESTIMATED			2024 Taxes: \$ 4,516.63
Legal Description FINES COVE SUBDIV LOT 10 1998R01638 12-09-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	14,274	0	59,222	0	73,496		
	2024	14,067	0	54,227	0	68,294		

Land Fair Cash Val: 42,201 Building Fair Cash Val: 162,681 **Non-Farm Value: 204,882**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 5970
2024	OWNER OCCUPD IMPROVEMENT	6000 5970

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/30/2007	\$18,000	2007R02100	No
10/05/2007	\$174,000	2007R04859	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-301-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-011-00 5 FINES POINT RD KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROWN PATRICIA H

5 FINES POINT RD
PO BOX 140
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$58,790** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-301-011-00	Class 0040	Acreage 0.610	Print Date 9/23/2024	2023 Taxes: \$ 2,693.36		ESTIMATED	2024 Taxes: \$ 2,693.35	
Legal Description FINES COVE SUBDIV LOT 11 2002R00670 1998R01638 12-09-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	13,561	0	43,476	0	57,037		
	2024	14,067	0	44,723	0	58,790		

Land Fair Cash Val: 42,201 Building Fair Cash Val: 134,169 **Non-Farm Value: 176,370**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	12450
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	14203

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-301-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-012-00 6 FINES POINT RD KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PULLIAM RONALD C TRUSTEE

Address to send notice if different than shown at left:

6 FINES POINT RD
KINCAID IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$77,823** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-301-012-00	Class 0040	Acreage 1.030	Print Date 9/23/2024	2023 Taxes: \$ 3,878.64		ESTIMATED	2024 Taxes: \$ 3,878.64	
Legal Description FINES COVE SUBDIV LOT 12 1999R01878 12-09-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	19,984	0	56,505	0	76,489		
	2024	19,693	0	58,130	0	77,823		

Land Fair Cash Val: 59,079 Building Fair Cash Val: 174,390 **Non-Farm Value: 233,469**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	17121
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	18455

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-301-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-013-00 13 FINES POINT RD KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PULLIAM RONALD C TRUSTEE

Address to send notice if different than shown at left:

6 FINES POINT RD
KINCAID IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,067** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-301-013-00	Class 0040	Acreage 0.500	Print Date 9/23/2024	2023 Taxes: \$ 1,201.66		ESTIMATED		2024 Taxes: \$ 1,288.42
Legal Description FINES COVE SUBDIV LOT 13 2002R03708 1998R01638 12-09-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	11,420	0	3,565	0	14,985		
	2024	12,660	0	3,407	0	16,067		

Land Fair Cash Val: 37,980 Building Fair Cash Val: 10,221 **Non-Farm Value: 48,201**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2002	\$16,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-301-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-014-00 2 FINES POINT RD KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

PUCETTI DANIEL & COURTNEY

Address to send notice if different than shown at left:

PO BOX 954
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$73,640 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 42,201 Building Fair Cash Val: 178,719 Non-Farm Value: 220,920

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Exemption History, Amount, Tax Year. Shows 6000 for 2023 and 2024.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows sales from 2008 and 2011.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-301-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-015-00 15 BROCCARDO CT RD KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOUT BRENT E & AMANDA J MURPHY

15 BROCCARDO CT RD
PO BOX 703
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$55,647** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-301-015-00	Class 0040	Acreage 0.600	Print Date 9/23/2024	2023 Taxes: \$ 3,998.28		ESTIMATED	2024 Taxes: \$ 3,981.20
Legal Description FINES COVE SUBDIV LOT 15 2001R07466 1998R01638 12-09-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	12,848	0	43,012	0	55,860	
	2024	12,660	0	42,987	0	55,647	

Land Fair Cash Val: 37,980 Building Fair Cash Val: 128,961 **Non-Farm Value: 166,941**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/27/2005	\$117,900	2005R03679	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-301-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-016-00 16 BROCCARDO CT RD KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FASSERO TODD L & BRIAN L FOX

UNIT 1
523 CHICAGO AVE
EVANSTON IL 60202

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,253** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-301-016-00	Class 0032	Acreage 0.930	Print Date 9/23/2024	2023 Taxes: \$ 1,030.28		ESTIMATED		2024 Taxes: \$ 902.38
Legal Description FINES COVE SUBDIV LOT 16 1998R01638 12-09-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	12,848	0	0	0	12,848		
	2024	11,253	0	0	0	11,253		

15-12-09-301-016-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
04/27/2015	\$18,000	2015R01578	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-017-00 17 SHERRIE AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

FASSERO TODD L &
BRIAN FOX
UNIT I
523 CHICAGO AVE
EVANSTON IL 60202

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property,
appeals this assessment of said property at \$76,654 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated _____
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for parcel 15-12-09-301-017-00 and tax values for 2023 and 2024.

Land Fair Cash Val: 42,201 Building Fair Cash Val: 187,761 Non-Farm Value: 229,962

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes entry for 02/26/2007 sale at \$15,000.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___/___/2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-301-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-018-00 18 SHERRIE AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROWN HERMAN THOMAS

18 SHERRIE AVE
PO BOX 385
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,350** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-301-018-00	Class 0040	Acreage 1.810	Print Date 9/23/2024	2023 Taxes: \$ 3,264.38		ESTIMATED		2024 Taxes: \$ 3,315.86
Legal Description FINES COVE SUBDIV LOTS 18&19 1998R01638 12-09-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	15,702	0	36,006	0	51,708		
	2024	17,583	0	34,767	0	52,350		

Land Fair Cash Val: 52,749 Building Fair Cash Val: 104,301 **Non-Farm Value: 157,050**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1999	\$22,000		Yes
04/28/2006	\$32,500	2006R02070	No
04/11/2014	\$38,000	2014R01278	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-301-018-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-301-020-00 760 BROCCARDO CT RD KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MERRIFIELD DAVID

760 BROCCARDO CT RD
PO BOX 211
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$51,700** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-301-020-00	Class 0040	Acreage 0.940	Print Date 9/23/2024	2023 Taxes: \$ 2,316.70		ESTIMATED		2024 Taxes: \$ 3,263.74
Legal Description FINES COVE SUBDIV PART LOT 1 2002R05406 1999R02353 12-09-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	14,274	0	39,067	0	53,341		
	2024	14,067	0	37,633	0	51,700		

Land Fair Cash Val: 42,201 Building Fair Cash Val: 112,899 **Non-Farm Value: 155,100**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	13451
2024	OWNER OCCUPD	6000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-301-020-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-001-00 9 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SCHOENUNG BRIAN

Address to send notice if different than shown at left:

PO BOX 776
KINCAID

IL 62540

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$85,958 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 47,481 Building Fair Cash Val: 210,393 Non-Farm Value: 257,874

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows 6000 for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Lists sales from 2004 to 2022.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-302-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-002-00 11 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LEONARD JOSEPH W & STEPHANIE K

Address to send notice if different than shown at left:

PO BOX 1114
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$87,314** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-302-002-00	Class 0040	Acreage 1.077	Print Date 9/23/2024	2023 Taxes: \$ 6,193.50		ESTIMATED		2024 Taxes: \$ 6,520.59
Legal Description SANGCHRIS LAKE EST LOT 6 2003R06741 12-09-F 99-07077 98-01915	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	14,274	0	68,961	0	83,235		
	2024	15,827	0	71,487	0	87,314		

Land Fair Cash Val: 47,481 Building Fair Cash Val: 214,461 **Non-Farm Value: 261,942**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/16/2010	\$190,000	2010R02526	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-302-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-003-00 13 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COLLINS MARK

Address to send notice if different than shown at left:

1754 NOVO DR
SCHERERVILLE IN 46375

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,067** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-302-003-00	Class 0030	Acreage 1.621	Print Date 9/23/2024	2023 Taxes: \$ 1,144.64		ESTIMATED	2024 Taxes: \$ 1,128.04
Legal Description SANGCHRIS LAKE EST LOT 7 2002R04102 1999R07077 1998R01915 12-09-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	14,274	0	0	0	14,274	
	2024	14,067	0	0	0	14,067	

Land Fair Cash Val: 42,201 Building Fair Cash Val: 0 **Non-Farm Value: 42,201**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2002	\$31,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-302-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-004-00 15 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BAILEY SHARON A

15 SARAH LN
PO BOX 11
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$109,320** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-302-004-00	Class 0040	Acreage 1.573	Print Date 9/23/2024	2023 Taxes: \$ 8,357.58		ESTIMATED	2024 Taxes: \$ 8,285.25
Legal Description SANGCHRIS LAKE EST LOT 8 2002R02962 1999R07077 1998R01915 12-09-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	17,129	0	93,093	0	110,222	
	2024	17,583	0	91,737	0	109,320	

Land Fair Cash Val: 52,749 Building Fair Cash Val: 275,211 **Non-Farm Value: 327,960**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2010	\$278,000	2010R02783	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-302-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-005-00 17 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COX ERNEST F & DIANA L

Address to send notice if different than shown at left:

1737 S SPRING ST
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$67,190** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: PARTIAL ASSESSMENT FOR NEW BUILDING

Parcel Number 15-12-09-302-005-00	Class 0040	Acreage 1.665	Print Date 9/23/2024	2023 Taxes: \$ 3,648.82		ESTIMATED		2024 Taxes: \$ 5,387.98
Legal Description SANGCHRIS LAKE EST LOT 9 2003R08264 12-09-F 99-07077 98-01915	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	15,345	0	30,157	0	45,502		
	2024	17,583	0	49,607	0	67,190		

Land Fair Cash Val: 52,749 Building Fair Cash Val: 148,821 **Non-Farm Value: 201,570**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2003	\$32,500		Yes
10/31/2016	\$26,500	2016R04079	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-302-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-006-00 19 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FOLI DENNIS R & KELLY S

Address to send notice if different than shown at left:

PO BOX 708
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$116,263** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-302-006-00	Class 0040	Acreage 1.598	Print Date 9/23/2024	2023 Taxes: \$ 7,965.22		ESTIMATED		2024 Taxes: \$ 8,301.85
Legal Description SANGCHRIS LAKE EST LOT 10 2003R06403 12-09-F 99-07077 98-01915	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	14,988	0	91,338	0	106,326		
	2024	17,583	0	98,680	0	116,263		

Land Fair Cash Val: 52,749 Building Fair Cash Val: 296,040 **Non-Farm Value: 348,789**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 997
2024	OWNER OCCUPD IMPROVEMENT IMPROVEMENT	6000 3333 3403

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2003	\$35,000		No
08/21/2012	\$31,000	2012R04679	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-302-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-007-00 21 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WILLIAMS JANET M

21 SARAH LN
PO BOX 706
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$104,120** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-302-007-00	Class 0040	Acreage 1.303	Print Date 9/23/2024	2023 Taxes: \$ 4,427.30		ESTIMATED		2024 Taxes: \$ 4,427.30
Legal Description SANGCHRIS LAKE EST LOT 11 2003R06140 12-09-F 99-07077 98-01915	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	17,842	0	84,273	0	102,115		
	2024	17,583	0	86,537	0	104,120		

Land Fair Cash Val: 52,749 Building Fair Cash Val: 259,611 **Non-Farm Value: 312,360**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	35905
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	37910

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2003	\$37,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-302-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-008-00 23 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HUDSON DENNIS L & VICKY L

Address to send notice if different than shown at left:

PO BOX 1157
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$81,576** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-302-008-00	Class 0040	Acreage 1.128	Print Date 9/23/2024	2023 Taxes: \$ 4,658.18	ESTIMATED			2024 Taxes: \$ 5,499.12
Legal Description SANGCHRIS LAKE EST 12-09-F 99-07077 98-01915	LOT 12	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	17,842	0	53,247	0	71,089	
		2024	17,583	0	63,993	0	81,576	

Land Fair Cash Val: 52,749 Building Fair Cash Val: 191,979 **Non-Farm Value: 244,728**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled Person	2000
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled Person	2000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/19/2005	\$39,500	2005R02222	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-302-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-009-00 25 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

PATTERSON NATHANIEL B

P O BOX
27 SARAH LN
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$14,067 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 42,201 Building Fair Cash Val: 0 Non-Farm Value: 42,201

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes red arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes entry for 10/15/2013 sale at \$375,000.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-302-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-010-00 27 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PATTERSON NATHANIEL B

P O BOX
27 SARAH LN
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$96,647** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-302-010-00	Class 0040	Acreage 1.470	Print Date 9/23/2024	2023 Taxes: \$ 7,197.16		ESTIMATED		2024 Taxes: \$ 7,269.00
Legal Description SANGCHRIS LAKE EST LOT 14 2002-05598QC 12-09-F 99-07077 98-01915	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	21,412	0	74,339	0	95,751		
	2024	21,100	0	75,547	0	96,647		

Land Fair Cash Val: 63,300 Building Fair Cash Val: 226,641 **Non-Farm Value: 289,941**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/15/2013	\$375,000	2013R04664	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-302-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-011-00 26 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PATTERSON NATHANIEL B & LINDSEY A

Address to send notice if different than shown at left:

PO BOX 445
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,397** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: PROPERTY DIVIDED INTO SEPARATE TAX BILLS
RECALCULATION OF FARMLAND ASSESSMENT

Parcel Number 15-12-09-302-011-00	Class 0030	Acreage 1.993	Print Date 9/23/2024	2023 Taxes: \$ 1,820.80		ESTIMATED		2024 Taxes: \$ 1,234.69
Legal Description SANGCHRIS LAKE EST LOT 15 12-09-F 99-07077 98-01915	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	13,896	8,810	0	0	22,706		
	2024	15,397	0	0	0	15,397		

Land Fair Cash Val: 46,191 Building Fair Cash Val: 0 **Non-Farm Value: 46,191**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/15/2013	\$375,000	2013R04664	Yes
07/10/2023	\$130,350	2023R01886	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-302-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-011-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PATTERSON NATHANIEL B & LINDSEY A

Address to send notice if different than shown at left:

PO BOX 445
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,426** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-302-011-01	Class 0011	Acreage 0.000	Print Date 9/23/2024	Taxes:				ESTIMATED 2024 Taxes:	\$ 755.87
Legal Description SANGCHRIS LAKE EST OUTLOT B & BEG SW COR SE1/4 W396.30' TO THE WATER'S EDGE OF SANGCHRIS LAKE BEING A CONTOUR LINE AT NORMAL POOL	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL			
	2024	0	9,426	0	0	9,426			

15-12-09-302-011-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-013-00 24 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PATTERSON NATHANIEL B & LINDSEY A

Address to send notice if different than shown at left:

PO BOX 445
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,870** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-302-013-00	Class 0040	Acreage 1.000	Print Date 9/23/2024	2023 Taxes: \$ 2,837.70		ESTIMATED		2024 Taxes: \$ 2,796.23
Legal Description SANGCHRIS LAKE EST LOT 16 12-09-F 99-07077 98-01915		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	7,851	0	27,536	0	35,387	
		2024	7,737	0	27,133	0	34,870	

Land Fair Cash Val: 23,211 Building Fair Cash Val: 81,399 **Non-Farm Value: 104,610**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/12/2018	\$19,000	2018R03370	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-302-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-014-00 22 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PATTERSON NATHANIEL B & LINDSEY A

Address to send notice if different than shown at left:

PO BOX 445
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,737** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-302-014-00	Class 0030	Acreage 1.003	Print Date 9/23/2024	2023 Taxes: \$ 629.58		ESTIMATED		2024 Taxes: \$ 620.43
Legal Description SANGCHRIS LAKE EST LOT 17 12-09-F 99-07077 98-01915		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	7,851	0	0	0	7,851	
		2024	7,737	0	0	0	7,737	

Land Fair Cash Val: 23,211 Building Fair Cash Val: 0 **Non-Farm Value: 23,211**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/31/2020	\$40,000	2020R2823	No
02/03/2021	\$23,500	2021R00464	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-302-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-016-00 18 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

ELDER ANDREW D & KIMBERLY S

Address to send notice if different than shown at left:

PO BOX 934
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$129,020 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: COMPLETE ASSESSMENT FOR NEW BUILDING WHICH WAS PARTIALLY ASSESSED LAST YEAR

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 46,419 Building Fair Cash Val: 340,641 Non-Farm Value: 387,060

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes data for 02/03/2021 sale.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-302-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-017-00 16 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ELDER ANDREW D & KIMBERLY S
 %DAVID A SMITH
 304 NORTH AVE
 PO BOX 934
 KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,737** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-302-017-00	Class 0030	Acreage 1.079	Print Date 9/23/2024	2023 Taxes: \$ 613.30		ESTIMATED		2024 Taxes: \$ 620.43
Legal Description SANGCHRIS LAKE EST LOT 20 12-09-F 99-07077 98-01915		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	7,648	0	0	0	7,648	
		2024	7,737	0	0	0	7,737	

Land Fair Cash Val: 23,211 Building Fair Cash Val: 0 **Non-Farm Value: 23,211**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
 Signed: _____ Date ___ / ___ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-302-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-302-018-00 10 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH DAVID A & GLORIA A

Address to send notice if different than shown at left:

2162 MCCLEOD ST
PORT CHARLOTTE FL 33953

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$353** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-302-018-00	Class 0032	Acreage 1.804	Print Date 9/23/2024	2023 Taxes: \$ 28.72		ESTIMATED	2024 Taxes: \$ 28.31
Legal Description SANGCHRIS LAKE EST LOT 21 1999R07077 1998R01915 12-09-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	358	0	0	0	358	
	2024	353	0	0	0	353	

15-12-09-302-018-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/23/2006	\$23,500	2006R03087	Yes
02/22/2010	\$16,000	2010R00673	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-303-001-00 1 MEADOW LN TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DULAKIS GUS JR & MARILYN E

Address to send notice if different than shown at left:

PO BOX 912
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$66,534** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-303-001-00	Class 0040	Acreage 0.875	Print Date 9/23/2024	2023 Taxes: \$ 4,660.42		ESTIMATED		2024 Taxes: \$ 4,992.70
Legal Description WILDWOOD POINT SUBDIV LOT 1 2003R08523 12-09-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,705	0	52,401	0	62,106		
	2024	11,957	0	54,577	0	66,534		

Land Fair Cash Val: 35,871 Building Fair Cash Val: 163,731 **Non-Farm Value: 199,602**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
10/01/2003	\$20,000		No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-303-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-303-002-00 2 MEADOW LN TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MAYER JOHNNIE S

Address to send notice if different than shown at left:

PO BOX 222
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$68,617** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-303-002-00	Class 0040	Acreage 0.553	Print Date 9/23/2024	2023 Taxes: \$ 4,698.78	ESTIMATED			2024 Taxes: \$ 4,698.77
Legal Description WILDWOOD POINT SUBDIV LOT 2 2003R08950 12-09-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	11,420	0	57,197	0	68,617		
	2024	14,067	0	54,550	0	68,617		

Land Fair Cash Val: 42,201 Building Fair Cash Val: 163,650 **Non-Farm Value: 205,851**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2003	\$22,000		Yes
06/22/2007	\$25,000	2007R03102	Yes
04/01/2010	\$19,900	2010R01394	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-303-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-303-003-00 3 MEADOW LN TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BURCHI VINCENTE D & STACEY

Address to send notice if different than shown at left:

PO BOX 207
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$118,223** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-303-003-00	Class 0040	Acreage 0.511	Print Date 9/23/2024	2023 Taxes: \$ 7,756.34		ESTIMATED		2024 Taxes: \$ 8,421.19
Legal Description WILDWOOD POINT SUBDIV LOT 3 2004R03832 12-09-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	14,274	0	95,089	0	109,363		
	2024	17,583	0	100,640	0	118,223		

Land Fair Cash Val: 52,749 Building Fair Cash Val: 301,920 **Non-Farm Value: 354,669**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2004	\$25,000		Yes
06/19/2007	\$35,000	2007R03018	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-303-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-303-004-00 4 MEADOW LN TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SAPETTI MICHAEL D & JONNA M

Address to send notice if different than shown at left:

PO BOX 64
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$83,323** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-303-004-00	Class 0040	Acreage 0.450	Print Date 9/23/2024	2023 Taxes: \$ 5,472.80	ESTIMATED			2024 Taxes: \$ 5,802.30
Legal Description WILDWOOD POINT SUBDIV LOT 4 2002R05413 12-09-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	14,274	0	64,658	0	78,932		
	2024	17,583	0	65,740	0	83,323		

Land Fair Cash Val: 52,749 Building Fair Cash Val: 197,220 **Non-Farm Value: 249,969**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2002	\$32,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-303-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-303-005-00 5 MEADOW LN TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MURPHY MARK H & PAMELA V

Address to send notice if different than shown at left:

200 E NORTHLINE RD
TUSCOLA IL 61953

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,300** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: PARTIAL ASSESSMENT FOR VACANT LOT

Parcel Number 15-12-09-303-005-00	Class 0030	Acreage 0.635	Print Date 9/23/2024	2023 Taxes: \$ 912.42		ESTIMATED 2024 Taxes: \$ 1,373.23	
Legal Description WILDWOOD POINT SUBDIV LOT 5 1999R05917 12-09-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	12,159	0	0	0	12,159	
	2024	18,300	0	0	0	18,300	

Land Fair Cash Val: 54,900 Building Fair Cash Val: 0 **Non-Farm Value: 54,900**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/12/2023	\$325,000	2023R01265	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-303-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-303-006-00 6 MEADOW LN TOVEY

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MURPHY MARK H & PAMELA V

Address to send notice if different than shown at left:

200 E NORTHLINE RD
TUSCOLA IL 61953

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$90,025** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-303-006-00	Class 0040	Acreage 3.222	Print Date 9/23/2024	2023 Taxes: \$ 6,510.24	ESTIMATED			2024 Taxes: \$ 6,305.22
Legal Description WILDWOOD POINT SUBDIV LOT 6 1999R05917 12-09-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	24,268	0	73,489	0	97,757		
	2024	21,100	0	68,925	0	90,025		

Land Fair Cash Val: 63,300 Building Fair Cash Val: 206,775 **Non-Farm Value: 270,075**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/12/2023	\$325,000	2023R01265	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-303-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-400-001-00 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SANDSTONE CREEK LLC
%BRUCE NATION

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$59,999** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-400-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 4,159.36		ESTIMATED	2024 Taxes: \$ 4,427.04
Legal Description E1/2 SE1/4 BK266 PG69	150083.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL
		2023	0	56,371	0	0	56,371
		2024	0	59,999	0	0	59,999

15-12-09-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/20/2015	\$2,140,000	2015R02819	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-401-001-00 402 BROCCARDO CT RD KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ALARIA KEVIN G & ROSETTA

402 BRACCARDO CT RD
PO BOX 235
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,460** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-401-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,403.82	ESTIMATED			2024 Taxes: \$ 1,640.69
Legal Description BROCCARDO WESTERN COURT LOT 1 BLK 1 152888.001 72-4687 126X101.3 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,722	0	16,784	0	23,506		
	2024	7,950	0	18,510	0	26,460		

Land Fair Cash Val: 23,850 Building Fair Cash Val: 55,530 **Non-Farm Value: 79,380**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-401-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-401-003-00 101 MISS DEBRA AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HART GARY L JR & TAMMY R

101 MISS DEBRA AVE
PO BOX 793
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,340** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-401-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,323.04		ESTIMATED	2024 Taxes: \$ 2,352.78
Legal Description BROCCARDO WESTERN COURT LOTS 2 & 3 BLK 1 86-14244 152888.003 97-01260 202.6X126 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	13,302	0	21,667	0	34,969	
	2024	15,730	0	19,610	0	35,340	

Land Fair Cash Val: 47,190 Building Fair Cash Val: 58,830 **Non-Farm Value: 106,020**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-401-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-401-004-00 101 SHERRIE AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CARTER GEORGE F & JUDITH A

101 SHERRIE AVE
PO BOX 294
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$45,460** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-401-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,492.34	ESTIMATED			2024 Taxes: \$ 1,492.34
Legal Description BROCCARDO WESTERN COURT LOT 6 BLK 1 2003R08539 152888.006 101.3X126 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,653	0	33,893	0	40,546		
	2024	7,867	0	37,593	0	45,460		

Land Fair Cash Val: 23,601 Building Fair Cash Val: 112,779 **Non-Farm Value: 136,380**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled Person	2000
	SEN FREEZE	8936
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled Person	2000
	SEN FREEZE	13850

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2003	\$16,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-401-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-401-005-00 103 SHERRIE AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

REXROAD NICOLE &
DEVON NICHOLS

103 SHERRIE AVE
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$59,328** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-401-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,019.96	ESTIMATED			2024 Taxes: \$ 4,757.52
Legal Description BROCCARDO WESTERN COURT LOT 5 BLK 1 152888.005 2004R03931 101.3X125 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,653	0	37,007	0	43,660		
	2024	7,867	0	51,461	0	59,328		

Land Fair Cash Val: 23,601 Building Fair Cash Val: 154,383 **Non-Farm Value: 177,984**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2004	\$81,050		Yes
07/14/2016	\$105,500	2016R02499	Yes
09/20/2021	\$149,900	2021R04022	Yes
07/19/2023	\$140,000	2023R01993	No
02/27/2024	\$178,000	2024R00533	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-401-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-401-006-00 105 SHERRI AVE BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PUCETTI MARK A & KRISTIN L

Address to send notice if different than shown at left:

PO BOX 18
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,644** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-401-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 786.10	ESTIMATED			2024 Taxes: \$ 853.54
Legal Description BROCCARDO WESTERN COURT LOT 4 BLK 1 2002R08441 152888.004 96-04102 101.3X126 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,653	0	3,150	0	9,803		
	2024	7,867	0	2,777	0	10,644		

Land Fair Cash Val: 23,601 Building Fair Cash Val: 8,331 **Non-Farm Value: 31,932**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-401-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-402-001-00 104 SHERRIE AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TENNANT JAMIE L

104 SHERRIE AVE
PO BOX 192
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,437** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-09-402-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,213.06		ESTIMATED		2024 Taxes: \$ 3,563.41
Legal Description BROCCARDO WESTERN COURT LOT 1 BLK 3 & BEG SE COR NW1/4 NW1/4 SE1/4 W636.14' TO POB W45.52' TO WATER EDGE N168.73' E88.99' S222.28' W TO	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	11,589	0	36,479	0	48,068		
	2024	12,730	0	39,707	0	52,437		

Land Fair Cash Val: 38,190 Building Fair Cash Val: 119,121 **Non-Farm Value: 157,311**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled Person	6000 2000
2024	OWNER OCCUPD Disabled Person	6000 2000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2004	\$96,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-402-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-402-002-00 SHERRIE AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

AYMER RANDY P & PAMELA R

Address to send notice if different than shown at left:

PO BOX 655
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$7,867 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated _____
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes rows for legal description and valuation breakdown by year (2023, 2024).

Land Fair Cash Val: 23,601 Building Fair Cash Val: 0 Non-Farm Value: 23,601

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___/___/2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-402-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-402-003-00 100 S SHERRIE AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AYMER RANDY P & PAMELA R

Address to send notice if different than shown at left:

PO BOX 655
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$54,240** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-402-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,197.90	ESTIMATED			2024 Taxes: \$ 3,467.42
Legal Description BROCCARDO WESTERN COURT LOT 3 BLK 3 152888.009 76-7352 127.2X101.3 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,722	0	44,157	0	50,879		
	2024	7,950	0	46,290	0	54,240		

Land Fair Cash Val: 23,850 Building Fair Cash Val: 138,870 **Non-Farm Value: 162,720**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-402-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-402-004-00 102 SHERRIE AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AYMER RANDY P & PAMELA R

Address to send notice if different than shown at left:

PO BOX 655
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,930** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-402-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,715.68	ESTIMATED			2024 Taxes: \$ 2,720.85
Legal Description BROCCARDO WESTERN COURT LOT 4 BLK 3 & BEG 425.92S SE COR 98-08785 152888.010 83-46555 103.7X125 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	11,510	0	9,885	0	21,395		
	2024	11,343	0	22,587	0	33,930		

Land Fair Cash Val: 34,029 Building Fair Cash Val: 67,761 **Non-Farm Value: 101,790**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/1998	\$10,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-402-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-402-006-00 208 BROCCARDO CT RD BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AULICH EUGENE W

208 BROCCARDO CT RD
PO BOX 825
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,723** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-402-006-00	Class 0010	Acreage 2.070	Print Date 9/23/2024	2023 Taxes: \$ 912.94	ESTIMATED			2024 Taxes: \$ 938.77
Legal Description PART NW1/4 SE1/4 COMM AT CENTER OF SECTION 9 E692.92' TO POB E326.51' S276' W326.60' N276' TO POB 1978R23504 150080.000 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,430	0	8,943	0	18,373		
	2024	9,290	0	9,433	0	18,723		

Land Fair Cash Val: 27,870 Building Fair Cash Val: 28,299 **Non-Farm Value: 56,169**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-402-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-402-007-00 204 BROCCARDO CT RD BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILONCUS MICHAEL W

Address to send notice if different than shown at left:

1061 E LANGLEYVILLE RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,946** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-402-007-00	Class 0010	Acreage 0.730	Print Date 9/23/2024	2023 Taxes: \$ 730.30	ESTIMATED			2024 Taxes: \$ 1,118.33
Legal Description SMITH ACRES LOT 2 2002R07121 2002R02543 1994R06049 1982R40350 125X256' 150074.000 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,612	0	8,495	0	15,107		
	2024	6,513	0	7,433	0	13,946		

Land Fair Cash Val: 19,539 Building Fair Cash Val: 22,299 **Non-Farm Value: 41,838**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/27/2016	\$37,000	2016R00307	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-402-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-402-007-01 1625 N 625 EAST RD KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PAGE PROPERTIES OF CHRISTIAN COUNTY

Address to send notice if different than shown at left:

3510 ROOSEVELT RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,689** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-402-007-01	Class 0021	Acreage 7.610	Print Date 9/23/2024	2023 Taxes: \$ 430.78		ESTIMATED		2024 Taxes: \$ 456.20
Legal Description SMITH ACRES LOT 1B 2004R07809 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	5,372	0	0	5,372		
	2024	0	5,689	0	0	5,689		

15-12-09-402-007-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/14/2004	\$53,175	2004R07809	No
11/03/2010	\$64,080	2010R05120	No
08/26/2014	\$379,060	2014R03293	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-402-007-02 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PAGE PROPERTIES OF CHRISTIAN COUNTY

Address to send notice if different than shown at left:

3510 ROOSEVELT RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,237** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-402-007-02	Class 0021	Acreage 8.010	Print Date 9/23/2024	2023 Taxes: \$ 362.96	ESTIMATED			2024 Taxes: \$ 386.41
Legal Description PART NW1/4 SE1/4 COMM AT CENTER OF SECTION 9 E1019.43' S276' TO POB S1047.99' W346.94' N332.11' E20.02' N716.15' E326.60' 2004R07809 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	4,919	0	0	4,919		
	2024	0	5,237	0	0	5,237		

15-12-09-402-007-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/26/2014	\$379,060	2014R03293	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-402-007-03 BROCCARDO CT KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ROGERS NATHAN A & MICHELLE A

Address to send notice if different than shown at left:

1638 N 400 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,053** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-402-007-03	Class 0010	Acreage 1.000	Print Date 9/23/2024	2023 Taxes: \$ 1,282.96	ESTIMATED			2024 Taxes: \$ 1,126.91
Legal Description SMITH ACRES LOT 1A 2004R07809 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,849	0	12,150	0	15,999		
	2024	3,790	0	10,263	0	14,053		

Land Fair Cash Val: 11,370 Building Fair Cash Val: 30,789 **Non-Farm Value: 42,159**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/17/2013	\$35,000	2013R05520	Yes
03/20/2017	\$39,000	2017R00990	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-402-007-03

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-402-008-00 200 BROCCARDO CT RD BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAKE BRANDON S

Address to send notice if different than shown at left:

200 BROCCARDO COURT RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,823** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-402-008-00	Class 0010	Acreage 1.000	Print Date 9/23/2024	2023 Taxes: \$ 1,347.18	ESTIMATED			2024 Taxes: \$ 1,167.50
Legal Description PART NW1/4 SE1/4 120X363 NE CR 150075.000 69-192247 120X363 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,624	0	17,634	0	24,258		
	2024	6,530	0	15,293	0	21,823		

Land Fair Cash Val: 19,590 Building Fair Cash Val: 45,879 **Non-Farm Value: 65,469**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/06/2016	\$61,900	2016R02355	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-402-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-402-009-00 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH DAVID A & GLORIA A

Address to send notice if different than shown at left:

2162 MCCLEOD ST
PORT CHARLOTTE FL 33953

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,325** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: PROPERTY DIVIDED INTO SEPARATE TAX BILLS

Parcel Number 15-12-09-402-009-00	Class 0021	Acreage 6.360	Print Date 9/23/2024	2023 Taxes: \$ 371.00		ESTIMATED	2024 Taxes: \$ 392.91
Legal Description COM SE COR W1/2 SE1/4 W1349.88' N453.67' N533.81' TO POB THENCE N430.00' E643.76' S430.00' W644.25' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	5,028	0	0	5,028	
	2024	0	5,325	0	0	5,325	

15-12-09-402-009-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/26/2014	\$379,060	2014R03293	No
07/10/2023	\$130,350	2023R01886	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-402-009-01 BULPITT

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PAGE PROPERTIES OF CHRISTIAN COUNTY

Address to send notice if different than shown at left:

3510 ROOSEVELT RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,263** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-402-009-01	Class 0021	Acreage 18.840	Print Date 9/23/2024	2023 Taxes: \$ 1,061.04		ESTIMATED	2024 Taxes: \$ 1,126.18
Legal Description BEG SECOR LOT B TH S1323.66' W434.37' N453.08' W270.71' N1231.06' NE18.87'CH S40' E20' S332.11' E673.88' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	14,380	0	0	14,380	
	2024	0	15,263	0	0	15,263	

15-12-09-402-009-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/26/2014	\$379,060	2014R03293	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-403-002-00 1 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LAURENZANA MICHAEL T & JENNIFER M

Address to send notice if different than shown at left:

PO BOX 1099
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$97,887** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-403-002-00	Class 0040	Acreage 2.320	Print Date 9/23/2024	2023 Taxes: \$ 6,702.38		ESTIMATED		2024 Taxes: \$ 7,368.44
Legal Description SANGCHRIS LAKE EST LOTS 1 & 2 1999R07077 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	21,412	0	68,169	0	89,581		
	2024	21,100	0	76,787	0	97,887		

Land Fair Cash Val: 63,300 Building Fair Cash Val: 230,361 **Non-Farm Value: 293,661**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/07/2006	\$7,000	2006R01028	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-403-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-403-003-00 5 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LAURENZANA MICHAEL T & JENNIFER M

Address to send notice if different than shown at left:

PO BOX 1099
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,033** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-403-003-00	Class 0030	Acreage 1.019	Print Date 9/23/2024	2023 Taxes: \$ 572.40		ESTIMATED		2024 Taxes: \$ 563.98
Legal Description SANGCHRIS LAKE EST LOT 3 1999R07077 1998R01915 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,138	0	0	0	7,138		
	2024	7,033	0	0	0	7,033		

Land Fair Cash Val: 21,099 Building Fair Cash Val: 0 **Non-Farm Value: 21,099**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/12/2005	\$13,000	2005R02712	Yes
07/11/2006	\$13,500	2006R03348	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-403-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-403-004-00 7 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WOODARD CHAD A &
 AMBER S BROWN
 7 SARAH LN
 PO BOX 948
 KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$64,657** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-403-004-00	Class 0040	Acreage 1.051	Print Date 9/23/2024	2023 Taxes: \$ 4,602.12		ESTIMATED		2024 Taxes: \$ 4,703.72
Legal Description SANGCHRIS LAKE EST LOT 4 2002-07786 12-09-G 99-07077 98-01915	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	12,848	0	50,542	0	63,390		
	2024	12,660	0	51,997	0	64,657		

Land Fair Cash Val: 37,980 Building Fair Cash Val: 155,991 **Non-Farm Value: 193,971**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/23/2006	\$152,000	2006R03071	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-403-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-403-005-00 6 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH DAVID A & GLORIA A

Address to send notice if different than shown at left:

2162 MCCLEOD ST
PORT CHARLOTTE FL 33953

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$353** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-403-005-00	Class 0032	Acreage 1.366	Print Date 9/23/2024	2023 Taxes: \$ 28.72		ESTIMATED	2024 Taxes: \$ 28.31	
Legal Description SANGCHRIS LAKE EST 12-09-G 99-07077 98-01915	LOT 22	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	358	0	0	0	358	
		2024	353	0	0	0	353	

15-12-09-403-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-403-006-00 2 SARAH LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH DAVID A & GLORIA A

Address to send notice if different than shown at left:

2162 MCCLEOD ST
PORT CHARLOTTE FL 33953

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$787** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-403-006-00	Class 0032	Acreage 1.897	Print Date 9/23/2024	2023 Taxes: \$ 63.84		ESTIMATED	2024 Taxes: \$ 63.11
Legal Description SANGCHRIS LAKE EST LOT 23 & OUT LOT C & W1/2 OUT LOT A 12-09-G 99-07077 98-01915	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	796	0	0	0	796	
	2024	787	0	0	0	787	

15-12-09-403-006-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-404-001-00 212 BROCCARDO CT RD KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AURE CHRISTOPHER B & ALEXANDRIA R

Address to send notice if different than shown at left:

PO BOX 1161
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$47,296** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: A REVALUATION OF PROPERTY.

Parcel Number 15-12-09-404-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,789.88		ESTIMATED 2024 Taxes: \$ 3,262.38	
Legal Description BROCCARDO COURT SUB PLAT 2 LOT 4 BLK 2 2004R07056 109.30X155.70' 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	9,558	0	44,316	0	53,874	
	2024	11,300	0	35,996	0	47,296	

Land Fair Cash Val: 33,900 Building Fair Cash Val: 107,988 **Non-Farm Value: 141,888**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 613
2024	OWNER OCCUPD IMPROVEMENT	6000 613

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/2004	\$23,000	2004R07056	No
03/18/2005	\$95,000	2005R01531	Yes
04/16/2010	\$115,000	2010R01626	Yes
09/09/2013	\$123,500	2013R04063	Yes
12/09/2021	\$141,900	2021R05197	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-404-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-404-002-00 210 BROCCARDO CT RD KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FASSERO DON GENE & JUDITH ANN

210 BROCCARDO CT RD
PO BOX 84
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$58,666** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-404-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,191.60		ESTIMATED	2024 Taxes: \$ 3,822.35
Legal Description BROCCARDO COURT SUB PLAT 2 LOT 9 BLK 2 2003R09909 94.39X155.28'AV 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	8,790	0	45,273	0	54,063	
	2024	10,393	0	48,273	0	58,666	

Land Fair Cash Val: 31,179 Building Fair Cash Val: 144,819 **Non-Farm Value: 175,998**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	15733
2024	ELDERLY	5000
	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-404-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-404-003-00 100 MISS DEBRA AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JAEGER PAULA

100 MISS DEBRA AVE
PO BOX 735
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$61,347** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-404-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,919.70		ESTIMATED		2024 Taxes: \$ 4,271.01
Legal Description BROCCARDO COURT SUB PLAT 2 LOT 3 BLK 2 109.30X155.70' 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,957	0	49,009	0	56,966		
	2024	9,410	0	51,937	0	61,347		

Land Fair Cash Val: 28,230 Building Fair Cash Val: 155,811 **Non-Farm Value: 184,041**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 2086
2024	OWNER OCCUPD IMPROVEMENT	6000 2086

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/24/2005	\$23,000	2005R02955	Yes
05/02/2006	\$100,000	2006R02116	Yes
05/06/2009	\$105,500	2009R02653	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-404-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-404-004-00 100 ROBERTA LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEDEN ERIC R & ATICIA M

100 ROBERTA AVE
PO BOX 988
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$47,746** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-404-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,026.94		ESTIMATED	2024 Taxes: \$ 3,347.62
Legal Description BROCCARDO COURT SUB PLAT 2 LOT 8 BLK 2 2004R07054 94.39X157.98' 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	6,940	0	36,807	0	43,747	
	2024	8,203	0	39,543	0	47,746	

Land Fair Cash Val: 24,609 Building Fair Cash Val: 118,629 **Non-Farm Value: 143,238**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/2004	\$22,000	2004R07054	Yes
07/11/2005	\$91,525	2005R03927	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-404-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-404-005-00 102 MISS DEBRA AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

YORK SCOTT

PO BOX 1121
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$48,930 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: ASSESSMENT INCREASED DUE TO REMODELING. MAY QUALIFY FOR IMPROVEMENT EXEMPTION.

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 23,520 Building Fair Cash Val: 123,270 Non-Farm Value: 146,790

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Exemption History, Amount, Tax Year. Shows 2023 and 2024 tax years with improvement exemptions.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows sales history from 2008 to 2021.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-404-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-404-006-00 104 ROBERTA LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CHAMBERS AMY M

Address to send notice if different than shown at left:

104 ROBERTA AVE
KINCAID IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$49,740** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-09-404-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,454.20		ESTIMATED		2024 Taxes: \$ 3,507.52
Legal Description BROCCARDO COURT SUB PLAT 3 LOT 7 BLK 2 94.38X160.68'AV 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,006	0	42,069	0	49,075		
	2024	8,283	0	41,457	0	49,740		

Land Fair Cash Val: 24,849 Building Fair Cash Val: 124,371 **Non-Farm Value: 149,220**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/17/2005	\$22,000	2005R04663	Yes
11/13/2006	\$94,500	2006R05676	Yes
10/29/2014	\$119,700	2014R04565	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-404-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-404-007-00 106 ROBERTA LN KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HERBERT JASON

Address to send notice if different than shown at left:

PO BOX 1041
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$48,162** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-404-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,880.88		ESTIMATED	2024 Taxes: \$ 3,332.95
Legal Description BROCCARDO COURT SUB PLAT 3 LOT 6 BLK 2 94.39X163.38'AV 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	7,075	0	47,920	0	54,995	
	2024	8,367	0	39,795	0	48,162	

Land Fair Cash Val: 25,101 Building Fair Cash Val: 119,385 **Non-Farm Value: 144,486**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	599
2024	IMPROVEMENT	599

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/21/2006	\$22,000	2006R01290	Yes
06/15/2007	\$105,000	2007R02939	No
07/22/2009	\$108,500	2009R04330	Yes
02/03/2021	\$140,000	2021R00456	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-404-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-405-001-00 201 MISS DEBRA AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ZIPPAY SCHYLUR R

PO BOX 644
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,110** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-405-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,985.76		ESTIMATED 2024 Taxes: \$ 2,013.58	
Legal Description BROCCARDO COURT SUB PLAT 4 LOT 1 BLK 2 146.26X155.7' 1978R23504 150078.000 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	10,647	0	20,116	0	30,763	
	2024	12,590	0	18,520	0	31,110	

Land Fair Cash Val: 37,770 Building Fair Cash Val: 55,560 **Non-Farm Value: 93,330**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/07/2018	\$75,000	2018R01791	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-405-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-405-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AYMER RANDY

100 SHERRIE AVE
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,243** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-405-002-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 462.06		ESTIMATED		2024 Taxes: \$ 420.44
Legal Description BROCCARDO COURT SUB PLAT 4 LOT 2 BLK 4 88.74X170.66'AV 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,762	0	0	0	5,762		
	2024	5,243	0	0	0	5,243		

Land Fair Cash Val: 15,729 Building Fair Cash Val: 0 **Non-Farm Value: 15,729**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/24/2018	\$8,000	2018R02338	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-405-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-405-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AYMER RANDY

Address to send notice if different than shown at left:

100 SHERRIE AVE
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,700** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-405-003-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 310.10		ESTIMATED 2024 Taxes: \$ 216.51	
Legal Description BROCCARDO COURT SUB PLAT 4 LOT 1 BLK4 91.04X189.60'AV 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,867	0	0	0	3,867	
	2024	2,700	0	0	0	2,700	

Land Fair Cash Val: 8,100 Building Fair Cash Val: 0 **Non-Farm Value: 8,100**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/24/2018	\$8,000	2018R02338	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-405-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-405-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AYMER RANDY P & PAMELA R

PO BOX 655
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,023** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-405-004-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 291.82		ESTIMATED 2024 Taxes: \$ 162.22	
Legal Description BROCCARDO COURT PLAT 4 LOT 3 BLK 4 88.77X171.03'AV 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,639	0	0	0	3,639	
	2024	2,023	0	0	0	2,023	

Land Fair Cash Val: 6,069 Building Fair Cash Val: 0 Non-Farm Value: 6,069

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/14/2021	\$5,000	2021R03913	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-405-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-405-005-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AYMER RANDY P & PAMELA R

Address to send notice if different than shown at left:

PO BOX 655
KINCAID IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,770** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-405-005-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 524.44		ESTIMATED		2024 Taxes: \$ 222.13
Legal Description BROCCARDO COURT PLAT 4 LOT 4 BLK 4 88.73X168.59'AV 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,540	0	0	0	6,540		
	2024	2,770	0	0	0	2,770		

Land Fair Cash Val: 8,310 Building Fair Cash Val: 0 **Non-Farm Value: 8,310**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/14/2021	\$5,000	2021R03913	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-405-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-405-006-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AYMER RANDY P & PAMELA R

PO BOX 655
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,807** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-405-006-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 515.62		ESTIMATED 2024 Taxes: \$ 626.04	
Legal Description BROCCARDO COURT PLAT 4 LOT 5 BLK 2 87.25X166.07' 12-09-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	6,430	0	0	0	6,430	
	2024	7,807	0	0	0	7,807	

Land Fair Cash Val: 23,421 Building Fair Cash Val: 0 **Non-Farm Value: 23,421**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/14/2021	\$5,000	2021R03913	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-09-405-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-501-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ILLINOIS & MIDLAND RR INC

STE 300
200 MERIDIAN CENTRE BLVD
ROCHESTER NY 14618

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-09-501-001-00	Class 5100	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 747.10	ESTIMATED			2024 Taxes: \$ 1,642.77
Legal Description TRACK 0.26 MILE STATE ASSESS 1996R00807 155100CIM.004	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0		
	2024	0	0	0	0	0		

15-12-09-501-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COMMONWEALTH EDISON CO
 % REAL ESTATE DEPT
 4TH FL
 3 LINCOLN CTR
 OAKBROOK TERRACE IL 60181

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,300** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-700-001-00	Class 7100	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 95.92		ESTIMATED	2024 Taxes: \$ 95.92
Legal Description COAL & MINERAL RIGHTS UNDERLY E1/2 NE1/4 N 51AC LEFT TO MINE 157710.000 96-01186	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	1,300	0	1,300	
	2024	0	0	1,300	0	1,300	

15-12-09-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-09-700-002-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LLA EXPLORATION INC

Address to send notice if different than shown at left:

1747 N 800 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$250** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-09-700-002-01	Class 7100	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 18.46		ESTIMATED	2024 Taxes: \$ 18.45
Legal Description COAL & MINERAL RIGHTS UNDERLY NW1/4 SE1/4 96-00177	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	250	0	250	
	2024	0	0	250	0	250	

15-12-09-700-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-100-001-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARAS FARM TRUST

650 RIDGE ST
PO BOX 416
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,897** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-100-001-00	Class 0021	Acreage 79.000	Print Date 9/23/2024	2023 Taxes: \$ 2,784.00		ESTIMATED	2024 Taxes: \$ 3,017.59
Legal Description N1/2 NW1/4 EX PLATTED SUB 150092.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	37,731	0	0	37,731	
	2024	0	40,897	0	0	40,897	

15-12-10-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-001-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KNIGHTS OF COLUMBUS
COUNCIL 4446

PO BOX 439
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$76,247** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-101-001-00	Class 0060	Acreage 4.690	Print Date 9/23/2024	2023 Taxes: \$ 5,936.16		ESTIMATED		2024 Taxes: \$ 6,114.26
Legal Description 348.13X587 IN NW1/4 ON ROUTE 104 150093.001 72-707 348X587 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	8,533	0	65,493	0	74,026		
	2024	8,789	0	67,458	0	76,247		

Land Fair Cash Val: 26,367 Building Fair Cash Val: 202,374 **Non-Farm Value: 228,741**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/09/2020	\$75,000	2020R03931	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-002-00 KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

CATHOLIC PASTORAL CENTER

1615 W WASHINGTON ST
SPRINGFIELD IL 62702

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$0 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-12-10-101-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-003-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

K OF C CLUB HOUSE

Address to send notice if different than shown at left:

PO BOX 439
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$777** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-101-003-00	Class 0063	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 62.32		ESTIMATED	2024 Taxes: \$ 62.31	
Legal Description BEG AT PT ON RT 104 & MAIN ST TH N150 E150 S165 W150 TO POB 81-36795 150094.000 BK318 PG563 150X150 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	777	0	0	0	777		
	2024	777	0	0	0	777		

Land Fair Cash Val: 2,331 Building Fair Cash Val: 0 **Non-Farm Value: 2,331**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-004-00 90 ST RITA CT KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

GREGORY MARC & MELANIE

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$21,665 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 12,660 Building Fair Cash Val: 52,335 Non-Farm Value: 64,995

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows 6000 for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Lists sales history from 2001 to 2024.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-006-00 70 ST RITA CT KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

POP VINCENT A

70 ST RITAS CT
PO BOX 751
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$37,634** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-101-006-00	Class 0040	Acreage 0.390	Print Date 9/23/2024	2023 Taxes: \$ 2,372.92		ESTIMATED		2024 Taxes: \$ 2,536.74
Legal Description BEG 413.45'N & 620' E SW COR NW1/4 RN N175' W100' S175' E100' & BEG 413.45'N & 620'E SW COR NW1/4 RN N175' E60' S175' W60' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,719	0	27,872	0	35,591		
	2024	7,607	0	30,027	0	37,634		

Land Fair Cash Val: 22,821 Building Fair Cash Val: 90,081 **Non-Farm Value: 112,902**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2003	\$53,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-008-00 40 ST RITA CT KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MAZO FRANK

Address to send notice if different than shown at left:

PO BOX 1011
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$25,183 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated _____
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024 valuations.

Land Fair Cash Val: 19,680 Building Fair Cash Val: 55,869 Non-Farm Value: 75,549

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Lists exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Table with columns: Sales History, Date Sold, Sale Price, Doc#, Qualified?.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___/___/2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-010-00 200 BEECH ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SOUTH FORK TOWNSHIP
TOWNSHIP BLDG ROAD DISTRICT

PO BOX 258
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$0 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-10-101-010-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-011-00 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MANSFIELD CLIFFORD B & LINDA G

1747 N 800 EAST RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,673** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-101-011-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 136.16		ESTIMATED 2024 Taxes: \$ 134.16	
Legal Description GLEN RIDGE SUBDIV LOT 21 150101.022 115.9X120AV 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,698	0	0	0	1,698	
	2024	1,673	0	0	0	1,673	

Land Fair Cash Val: 5,019 Building Fair Cash Val: 0 Non-Farm Value: 5,019

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/09/2023	\$2,000	2023R00377	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-012-00 303 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BELK AMANDA S

PO BOX 422
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,796** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-101-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,906.82	ESTIMATED			2024 Taxes: \$ 2,790.30
Legal Description GLEN RIDGE SUBDIV LOT 22 150101.023 93-04438 100X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,856	0	38,393	0	42,249		
	2024	3,797	0	36,999	0	40,796		

Land Fair Cash Val: 11,391 Building Fair Cash Val: 110,997 **Non-Farm Value: 122,388**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1993	\$52,500		Yes
01/14/2020	\$103,000	2020R00154	Yes
06/11/2021	\$122,400	2021R02393	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-013-00 401 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOWARD PATRICIA

401 GRAND AVE
PO BOX 466
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$42,704** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-101-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,522.82		ESTIMATED		2024 Taxes: \$ 1,522.81
Legal Description GLEN RIDGE SUBDIV LTS 23 & 24 150101.025 77-14717 200X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,708	0	32,143	0	39,851		
	2024	7,597	0	35,107	0	42,704		

Land Fair Cash Val: 22,791 Building Fair Cash Val: 105,321 **Non-Farm Value: 128,112**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	SEN FREEZE	9861
	OWNER OCCUPD	6000
2024	ELDERLY	5000
	SEN FREEZE	12714
	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-014-00 403 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CEARLOCK VIVIAN G

403 GRAND AVE
PO BOX 705
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$36,607** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-101-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,389.78		ESTIMATED		2024 Taxes: \$ 1,389.78
Legal Description GLEN RIDGE SUBDIV LOT 25 150101.026 2001-02653 100X120 12-10-A 77-15932	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,856	0	30,108	0	33,964		
	2024	3,797	0	32,810	0	36,607		

Land Fair Cash Val: 11,391 Building Fair Cash Val: 98,430 **Non-Farm Value: 109,821**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	5633
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	8276

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2001	\$69,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-015-00 405 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MERANO DALE L & BEVERLY K

405 GRAND AVE
PO BOX 76
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,984** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-101-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,899.14	ESTIMATED			2024 Taxes: \$ 2,404.42
Legal Description GLEN RIDGE SUBDIV LOT 26 150101.027 77-13739 100X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,856	0	34,422	0	38,278		
	2024	3,797	0	37,187	0	40,984		

Land Fair Cash Val: 11,391 Building Fair Cash Val: 111,561 **Non-Farm Value: 122,952**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	IMPROVEMENT	3595
2024	OWNER OCCUPD	6000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-016-00 501 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RAKERS BENJAMIN J

Address to send notice if different than shown at left:

PO BOX 114
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$76,659** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-101-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 6,426.52		ESTIMATED	2024 Taxes: \$ 5,666.16	
Legal Description GLEN RIDGE SUBDIV LOT 27 150101.028 94-3411 100X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,856	0	82,285	0	86,141		
	2024	3,797	0	72,862	0	76,659		

Land Fair Cash Val: 11,391 Building Fair Cash Val: 218,586 **Non-Farm Value: 229,977**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/03/2020	\$210,000	2020R02863	Yes
03/07/2023	\$230,000	2023R00629	No
03/07/2023	\$230,000	2023R00630	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-017-00 503 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RIDGEWAY EDWIN

503 GRAND AVE
PO BOX 622
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,940** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-101-017-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,086.10	ESTIMATED			2024 Taxes: \$ 1,151.05
Legal Description GLEN RIDGE SUBDIV LOT 28 150101.029 72-2229 100X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,856	0	32,933	0	36,789		
	2024	3,797	0	37,143	0	40,940		

Land Fair Cash Val: 11,391 Building Fair Cash Val: 111,429 **Non-Farm Value: 122,820**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Exemption History

Amount

Tax Year 2023

OWNER OCCUPD 6000
ELDERLY 5000
SEN FREEZE 8935
Disabled 30-49% Vete 2500
IMPROVEMENT 810

Tax Year 2024

OWNER OCCUPD 6000
ELDERLY 5000
SEN FREEZE 13086
Disabled 30-49% Vete 2500

Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/26/2005	\$84,900	2005R06067	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-018-00 505 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CONRATH LINDA L & MICHAEL D

Address to send notice if different than shown at left:

PO BOX 838
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$45,217** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-101-018-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,524.56		ESTIMATED		2024 Taxes: \$ 2,743.87
Legal Description GLEN RIDGE SUBDIV LOT 29 & 32 150101.030 75-1475 100X120 & 115X80 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,399	0	35,083	0	42,482		
	2024	7,290	0	37,927	0	45,217		

Land Fair Cash Val: 21,870 Building Fair Cash Val: 113,781 **Non-Farm Value: 135,651**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-018-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-019-00 507 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NELSON RON W & CHRISTIE L

507 GRAND AVE
PO BOX 685
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,317** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-101-019-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,456.64		ESTIMATED	2024 Taxes: \$ 2,751.89	
Legal Description GLEN RIDGE SUBDIV LOT 30 99-02657 150101.031 89-9487 100X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,856	0	32,779	0	36,635		
	2024	3,797	0	36,520	0	40,317		

Land Fair Cash Val: 11,391 Building Fair Cash Val: 109,560 **Non-Farm Value: 120,951**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1999	\$82,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-019-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-020-00 506 SPUR AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCHIERER CHRISTINA L

Address to send notice if different than shown at left:

PO BOX 746
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,013** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: IMPROVEMENT ADDED, MAY QUALIFY FOR AN IMPROVEMENT EXEMPTION. CHECK WITH BOARD OF REVIEW.

Parcel Number 15-12-10-101-020-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,321.28		ESTIMATED 2024 Taxes: \$ 2,551.89	
Legal Description GLEN RIDGE SUBDIV LOT 33 2004R03521 115X80 12-10-A 99-3648 96-05232 98-08628 75-4448 150101.034	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,543	0	31,594	0	35,137	
	2024	3,493	0	34,520	0	38,013	

Land Fair Cash Val: 10,479 Building Fair Cash Val: 103,560 **Non-Farm Value: 114,039**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 190
2024	OWNER OCCUPD IMPROVEMENT	6000 190

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2004	\$81,000		Yes
09/17/2013	\$86,900	2013R04216	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-020-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-022-00 501 SPUR AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRIS VINCENT O

Address to send notice if different than shown at left:

PO BOX 742
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,796** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-101-022-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,140.04		ESTIMATED		2024 Taxes: \$ 2,309.16
Legal Description GLEN RIDGE SUBDIV LOT 31 1996R04580 1995R00695 118X80' 150101.032 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,543	0	29,144	0	32,687		
	2024	3,493	0	31,303	0	34,796		

Land Fair Cash Val: 10,479 Building Fair Cash Val: 93,909 **Non-Farm Value: 104,388**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1996	\$62,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-022-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-101-025-00 507 SPUR AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

REES RUBY DARLENE

507 SPUR AVE
PO BOX 523
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$60,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-101-025-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,451.74	ESTIMATED			2024 Taxes: \$ 3,821.30
Legal Description GLEN RIDGE SUBDIV LOTS 34 35 & 36 & BEG NW COR LOT 36 W60 2000-01494 60X345 150101.037 2000-04164 80X348 12-10-A S345 E60 N345 TO THE BEG	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	12,118	0	41,504	0	53,622		
	2024	11,940	0	48,713	0	60,653		

Land Fair Cash Val: 35,820 Building Fair Cash Val: 146,139 **Non-Farm Value: 181,959**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled Person	2000
	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	10048
2024	Disabled Person	2000
	OWNER OCCUPD	6000
	ELDERLY	5000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-101-025-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-001-00 506 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOYD MICHAEL & JULIE

506 GRAND AVE
PO BOX 916
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$73,993** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-102-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 5,201.22		ESTIMATED		2024 Taxes: \$ 5,372.18
Legal Description GLEN RIDGE SUBDIV N1/2 LT 19 & ALL LT 20 150101.021 73-6970 150X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,779	0	59,082	0	64,861		
	2024	5,697	0	68,296	0	73,993		

Land Fair Cash Val: 17,091 Building Fair Cash Val: 204,888 **Non-Farm Value: 221,979**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	0
<u>Tax Year</u> 2024 OWNER OCCUPD IMPROVEMENT	6000 1000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2023	\$219,000	2023R02474	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-002-00 502 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SAPETTI FRED J & LANAL

502 GRAND AVE
PO BOX 888
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$58,487** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-102-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,616.02		ESTIMATED		2024 Taxes: \$ 3,807.99
Legal Description GLEN RIDGE SUBDIV LOT 18 & S1/2 LT 19 150101.019 150X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,779	0	50,314	0	56,093		
	2024	5,697	0	52,790	0	58,487		

Land Fair Cash Val: 17,091 Building Fair Cash Val: 158,370 **Non-Farm Value: 175,461**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-003-00 406 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SAPETTI FRED J & LANAL

Address to send notice if different than shown at left:

PO BOX 888
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,797** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-102-003-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 309.38		ESTIMATED	2024 Taxes: \$ 304.48
Legal Description GLEN RIDGE SUBDIV LOT 17 150101.018 94-07385 100X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,858	0	0	0	3,858	
	2024	3,797	0	0	0	3,797	

Land Fair Cash Val: 11,391 Building Fair Cash Val: 0 **Non-Farm Value: 11,391**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-004-00 404 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILLS VINCE

PO BOX 1025
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,297** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-102-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,753.98	ESTIMATED			2024 Taxes: \$ 2,349.33
Legal Description GLEN RIDGE SUBDIV LOT 16 150101.017 86-15078 100X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,856	0	36,487	0	40,343		
	2024	3,797	0	31,500	0	35,297		

Land Fair Cash Val: 11,391 Building Fair Cash Val: 94,500 **Non-Farm Value: 105,891**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1986	\$70,000		Yes
04/16/2021	\$105,900	2021R01546	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-005-00 402 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LANCASTER PREN C & DENA A

402 GRAND AVE
PO BOX 874
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$48,314** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-102-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,837.46	ESTIMATED			2024 Taxes: \$ 2,992.22
Legal Description GLEN RIDGE SUBDIV LOT 15 150101.016 75-2926 100X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,856	0	42,528	0	46,384		
	2024	3,797	0	44,517	0	48,314		

Land Fair Cash Val: 11,391 Building Fair Cash Val: 133,551 **Non-Farm Value: 144,942**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-006-00 400 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FASSERO JAY

400 GRAND AVE
PO BOX 93
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$41,247** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-102-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,684.86		ESTIMATED 2024 Taxes: \$ 2,826.46	
Legal Description GLEN RIDGE SUBDIV LOT 14 150101.015 2004R05189 100X120 12-10-A 74-14164	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,856	0	35,625	0	39,481	
	2024	3,797	0	37,450	0	41,247	

Land Fair Cash Val: 11,391 Building Fair Cash Val: 112,350 **Non-Farm Value: 123,741**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-007-00 398 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HENLEY GLORIA L

398 GRAND AVE
PO BOX 284
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,374** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-102-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 971.92		ESTIMATED	2024 Taxes: \$ 971.91
Legal Description GLEN RIDGE SUBDIV LOT 13 94-3086&7 150101.014 95-05472 100X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,856	0	35,555	0	39,411	
	2024	3,797	0	36,577	0	40,374	

Land Fair Cash Val: 11,391 Building Fair Cash Val: 109,731 **Non-Farm Value: 121,122**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	16291
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	17254

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-008-00 396 GRAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HENSON MARY A & HAROLD R TRUST

396 GRAND AVE
PO BOX 866
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$36,550** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-102-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,154.18		ESTIMATED 2024 Taxes: \$ 1,154.18	
Legal Description GLEN RIDGE SUBDIV LOT 12 97-01017 100X120 12-10-A 91-04552 95-01020 150101.013	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,856	0	27,393	0	31,249	
	2024	3,797	0	32,753	0	36,550	

Land Fair Cash Val: 11,391 Building Fair Cash Val: 98,259 **Non-Farm Value: 109,650**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	5856
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	11157

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1997	\$58,500		Yes
03/02/2016	\$75,000	2016R00769	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-009-00 204 BEECH ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MERANO VINCENT STEVEN

Address to send notice if different than shown at left:

PO BOX 481
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$36,663** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-102-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,133.94		ESTIMATED 2024 Taxes: \$ 2,458.87	
Legal Description GLEN RIDGE SUBDIV LOT 11 150101.012 95-02174 114X120AV 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,393	0	28,218	0	32,611	
	2024	4,330	0	32,333	0	36,663	

Land Fair Cash Val: 12,990 Building Fair Cash Val: 96,999 **Non-Farm Value: 109,989**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/07/2020	\$20,000	2020R03891	No
07/18/2022	\$110,000	2022R02654	Yes
07/26/2024	\$110,000	2024R02207	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-010-00 206 BEECH ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EVANS AVA J & RAYMOND A

206 BEECH ST
PO BOX 710
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$92,613** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-102-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,241.30	ESTIMATED			2024 Taxes: \$ 6,544.56
Legal Description GLEN RIDGE SUBDIV LOT 1 150101.002 98-03821 112X120 12-10-A 96-02205 83-45435	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,335	0	83,245	0	87,580		
	2024	4,273	0	88,340	0	92,613		

Land Fair Cash Val: 12,819 Building Fair Cash Val: 265,020 **Non-Farm Value: 277,839**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	36160
2024	ELDERLY	5000
	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-011-00 303 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JOHNSON ROBERT L

PO BOX 64
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$69,993** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-102-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,882.20		ESTIMATED		2024 Taxes: \$ 4,730.66
Legal Description GLEN RIDGE SUBDIV LOT 2 95-2599 94-4658 150101.003 94-6051 100X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,856	0	43,086	0	46,942		
	2024	3,797	0	66,196	0	69,993		

Land Fair Cash Val: 11,391 Building Fair Cash Val: 198,588 **Non-Farm Value: 209,979**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/18/2022	\$210,000	2022R02657	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-012-00 305 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MONTS MONICA & DARREL

305 COMMONWEALTH
PO BOX 837
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$37,287** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-102-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,132.98	ESTIMATED			2024 Taxes: \$ 2,508.91
Legal Description GLEN RIDGE SUBDIV LOT 3 98-04315 150101.004 93-05940 100X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,856	0	28,743	0	32,599		
	2024	3,797	0	33,490	0	37,287		

Land Fair Cash Val: 11,391 Building Fair Cash Val: 100,470 **Non-Farm Value: 111,861**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1998	\$74,900		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-013-00 401 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RIOS LOPEZ EDUARDO J

401 COMMONWEALTH AVE
PO BOX 1102
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$44,996** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-102-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,478.68	ESTIMATED			2024 Taxes: \$ 3,127.10
Legal Description GLEN RIDGE SUBDIV LOT 4 150101.005 77-16235 100X120 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,856	0	33,054	0	36,910		
	2024	3,797	0	41,199	0	44,996		

Land Fair Cash Val: 11,391 Building Fair Cash Val: 123,597 **Non-Farm Value: 134,988**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/15/2021	\$135,000	2021R02421	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-014-00 403 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DEES JASON E & MINDY M

Address to send notice if different than shown at left:

PO BOX 1095
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$45,334 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 11,391 Building Fair Cash Val: 124,611 Non-Farm Value: 136,002

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Lists exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Lists sales history for 2010 and 2014.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-015-00 405 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SKINNER CHRISTOPHER R

405 COMMONWEALTH AVE
PO BOX 656
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$48,344** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-102-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,454.20		ESTIMATED		2024 Taxes: \$ 3,395.57
Legal Description GLEN RIDGE SUBDIV LOT 6 150101.007 92-6203 100X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,856	0	45,219	0	49,075		
	2024	3,797	0	44,547	0	48,344		

Land Fair Cash Val: 11,391 Building Fair Cash Val: 133,641 **Non-Farm Value: 145,032**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/23/2014	\$117,000	2014R03873	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-016-00 503 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH LARRY R & MARY LEE

503 COMMONWEALTH AVE
PO BOX 355
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$74,344** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-102-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 4,515.04	ESTIMATED			2024 Taxes: \$ 5,079.57
Legal Description GLEN RIDGE SUBDIV LOTS 7 & 8 150101.008 200X120 12-10-A 1974R11172	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,708	0	59,596	0	67,304		
	2024	7,597	0	66,747	0	74,344		

Land Fair Cash Val: 22,791 Building Fair Cash Val: 200,241 **Non-Farm Value: 223,032**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-017-00 505 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BEHREND'S DENNIS & BARBARA

505 COMMONWEALTH AVE
PO BOX 13
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$50,874** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-102-017-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,878.92	ESTIMATED			2024 Taxes: \$ 3,197.50
Legal Description GLEN RIDGE SUBDIV LOT 9 150101.010 94-1047 100X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,856	0	43,045	0	46,901		
	2024	3,797	0	47,077	0	50,874		

Land Fair Cash Val: 11,391 Building Fair Cash Val: 141,231 **Non-Farm Value: 152,622**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-102-018-00 507 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LUTTRELL D WAYNE & CANDYCE L

507 COMMONWEALTH AVE
PO BOX 587
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$37,720** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-102-018-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,094.50	ESTIMATED			2024 Taxes: \$ 2,543.63
Legal Description GLEN RIDGE SUBDIV LOT 10 150101.011 81-35767 100X120 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,856	0	29,292	0	33,148		
	2024	3,797	0	33,923	0	37,720		

Land Fair Cash Val: 11,391 Building Fair Cash Val: 101,769 **Non-Farm Value: 113,160**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 1029
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-102-018-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-103-001-00 MAIN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TUCKER BRENDA L

Address to send notice if different than shown at left:

PO BOX 623
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,583** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-103-001-00	Class 0061	Acreage 0.270	Print Date 9/23/2024	2023 Taxes: \$ 2,180.54		ESTIMATED		2024 Taxes: \$ 2,131.70
Legal Description PART SW1/4 NW1/4 LY N OF BEECH ST 2002R08397 150096.000 2001-02884 75X140 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,500	0	22,692	0	27,192		
	2024	4,433	0	22,150	0	26,583		

Land Fair Cash Val: 13,299 Building Fair Cash Val: 66,450 **Non-Farm Value: 79,749**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/10/2013	\$70,000	2013R04083	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-103-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-103-003-00 110 BEECH ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROCKMEYER RANDAL A

Address to send notice if different than shown at left:

PO BOX 16
FARMERSVILLE IL 62533

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,393** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-103-003-00	Class 0040	Acreage 0.240	Print Date 9/23/2024	2023 Taxes: \$ 704.32		ESTIMATED		2024 Taxes: \$ 753.23
Legal Description BEG 33E & 263N OF SW COR NW RN N75 E140 S75 TH W140 MHRE 150098.000 87-20866 75X140 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,190	0	6,593	0	8,783		
	2024	2,160	0	7,233	0	9,393		

Land Fair Cash Val: 6,480 Building Fair Cash Val: 21,699 **Non-Farm Value: 28,179**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/24/2009	\$5,000	2009R04950	No
11/27/2019	\$23,500	2019R04155	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-103-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-103-004-00 110 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CASEYS RETAIL COMPANY
ATTN: ACCOUNTING

PO BOX 54288
LEXINGTON KY 40555

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$151,815** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-103-004-00	Class 0060	Acreage 0.560	Print Date 9/23/2024	2023 Taxes: \$ 11,818.68		ESTIMATED 2024 Taxes: \$ 12,174.08	
Legal Description TR S OF RT 104 N OF BEECH ST & 140 E OF MAIN ST 150103.000 89-8906 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	19,223	0	128,160	0	147,383	
	2024	19,810	0	132,005	0	151,815	

Land Fair Cash Val: 59,430 Building Fair Cash Val: 396,015 **Non-Farm Value: 455,445**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/12/2007	\$550,000	2007R00239	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-103-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-104-001-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOARMAN BROTHERS PARTNERSHIP

Address to send notice if different than shown at left:

5815 BOARMAN RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$70,048** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-104-001-00	Class 0060	Acreage 2.571	Print Date 9/23/2024	2023 Taxes: \$ 5,453.58		ESTIMATED	2024 Taxes: \$ 5,617.16
Legal Description BEG COR C&IM RR & MAIN ST N150 E394S100E115S90E78S185 NWLY 630 EX 0.25AC &EX .08AC& 99-07192 BK260 PG149 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	18,381	0	49,627	0	68,008	
	2024	18,932	0	51,116	0	70,048	

Land Fair Cash Val: 56,796 Building Fair Cash Val: 153,348 **Non-Farm Value: 210,144**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
05/06/2008	\$170,102	2008R02389	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-104-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-104-001-01 102 MAIN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOARMAN BROTHERS PARTNERSHIP

Address to send notice if different than shown at left:

5815 BOARMAN RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,963** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-104-001-01	Class 0040	Acreage 0.250	Print Date 9/23/2024	2023 Taxes: \$ 1,140.06		ESTIMATED		2024 Taxes: \$ 1,199.89
Legal Description PRT SW NW BEG S LINE BEECH ST & E LINE MAIN ST E140 S80 W140 N80 TO BEG 95-3634 93-06838 80X140 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,567	0	11,650	0	14,217		
	2024	2,533	0	12,430	0	14,963		

Land Fair Cash Val: 7,599 Building Fair Cash Val: 37,290 **Non-Farm Value: 44,889**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1993	\$8,000		Yes
11/03/2014	\$152,000	2014R04628	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-104-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-104-001-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOARMAN BROTHERS PARTNERSHIP

Address to send notice if different than shown at left:

5815 BOARMAN RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,500** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-104-001-02	Class 0060	Acreage 0.603	Print Date 9/23/2024	2023 Taxes: \$ 817.30	ESTIMATED			2024 Taxes: \$ 842.00
Legal Description BEG SW COR NW1/4 N52.62 E33 N70.83 E140 S30 E219.75 N130 W218.86 S80 TO BEG 99-01539 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,496	0	6,696	0	10,192		
	2024	3,600	0	6,900	0	10,500		

Land Fair Cash Val: 10,800 Building Fair Cash Val: 20,700 **Non-Farm Value: 31,500**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1999	\$17,500		Yes
11/03/2014	\$152,000	2014R04628	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-104-001-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-104-002-00 IL RTE 104 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HORRER HARRY H

Address to send notice if different than shown at left:

PO BOX 533
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,577** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-104-002-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 687.16	ESTIMATED			2024 Taxes: \$ 447.22
Legal Description BG 203.45N & 426.77E SW COR NW TH S100 E100 N100 W100 150111.001 93-7688 100X100 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,646	0	5,923	0	8,569		
	2024	2,607	0	8,970	0	11,577		

Land Fair Cash Val: 7,821 Building Fair Cash Val: 26,910 **Non-Farm Value: 34,731**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/1993	\$6,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-104-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-104-003-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KEMMERLING MARVIN G JR

1925 N 800 RD E
PO BOX 505
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,040** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-104-003-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,712.06		ESTIMATED		2024 Taxes: \$ 1,687.20
Legal Description BEG 203.45 N & 33E OF SW COR NW1/4 THE E493.86 POB S160 E90.5 N160 W90.5 TO POB EX RT104 ROW 99-01926 93-01473 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,239	0	19,111	0	21,350		
	2024	2,207	0	18,833	0	21,040		

Land Fair Cash Val: 6,621 Building Fair Cash Val: 56,499 **Non-Farm Value: 63,120**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/18/2014	\$10,000	2014R04884	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-104-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-104-004-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CHRISTIAN COUNTY FARMERS
SUPPLY CO

PO BOX 377
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$43,078** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-104-004-00	Class 0060	Acreage 0.800	Print Date 9/23/2024	2023 Taxes: \$ 3,353.88		ESTIMATED	2024 Taxes: \$ 3,454.43
Legal Description A TR BTW C&IM R/W & RT 104 150101.000 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	6,645	0	35,179	0	41,824	
	2024	6,844	0	36,234	0	43,078	

Land Fair Cash Val: 20,532 Building Fair Cash Val: 108,702 **Non-Farm Value: 129,234**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-104-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-105-001-00 211 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SISTI CHRISTOPHER

211 COMMONWEALTH
PO BOX 452
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,627** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-105-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 426.94	ESTIMATED			2024 Taxes: \$ 545.53
Legal Description KINCAID KATCHER SUBDIV LT 1 MHRE 152890.001 100X100 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,268	0	16,880	0	19,148		
	2024	2,237	0	18,390	0	20,627		

Land Fair Cash Val: 6,711 Building Fair Cash Val: 55,170 Non-Farm Value: **61,881**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 7824
2024	OWNER OCCUPD IMPROVEMENT	6000 7824

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/12/2019	\$5,000	2019R01103	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-105-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-105-002-00 207 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOODAY JOHNATHON J &
OLIVIA L LITTLETON

PO BOX 893
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$54,330** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-105-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,663.50		ESTIMATED		2024 Taxes: \$ 3,875.59
Legal Description KINCAID KATCHER SUBDIV LOT 2 2005R03034 2001R05513 BK343 PG128 100X100' 152890.002 12-10-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,512	0	48,173	0	51,685		
	2024	3,460	0	50,870	0	54,330		

Land Fair Cash Val: 10,380 Building Fair Cash Val: 152,610 **Non-Farm Value: 162,990**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/26/2006	\$110,000	2006R05361	Yes
10/12/2010	\$105,000	2010R04628	Yes
04/25/2012	\$81,300	2012R02266	Yes
08/13/2018	\$126,000	2018R02644	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-105-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-105-003-00 205 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PENDLETON JOHN

205 COMMONWEALTH AVE
PO BOX 151
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,397** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-105-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,634.44		ESTIMATED		2024 Taxes: \$ 1,876.21
Legal Description KINCAID KATCHER SUBDIV LT 3 152890.003 2004R02225 75X100 12-10-E CFD 95 89-9497	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,633	0	23,749	0	26,382		
	2024	2,597	0	26,800	0	29,397		

Land Fair Cash Val: 7,791 Building Fair Cash Val: 80,400 **Non-Farm Value: 88,191**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1989	\$44,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-105-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-105-004-00 201 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CASSISTA STEPHANIE M

PO BOX 1145
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,997** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-105-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,319.34	ESTIMATED			2024 Taxes: \$ 1,924.32
Legal Description KINCAID KATCHER SUBDIV LOT 4 1998R08649 1994R06862 1989R08345 75X100' 152890.004 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,633	0	32,290	0	34,923		
	2024	2,597	0	27,400	0	29,997		

Land Fair Cash Val: 7,791 Building Fair Cash Val: 82,200 **Non-Farm Value: 89,991**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/1998	\$52,000		Yes
05/22/2006	\$39,000	2006R02453	No
05/28/2021	\$90,000	2021R02226	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-105-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-105-005-00 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

KATCHER MARY ANN ESTATE

111 COMMONWEALTH AVE
PO BOX 44
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$7,414 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 14,811 Building Fair Cash Val: 7,431 Non-Farm Value: 22,242

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-105-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-105-005-01 111 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SAPETTI CYNTHIA J

Address to send notice if different than shown at left:

PO BOX 44
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,133** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-105-005-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,369.90		ESTIMATED		2024 Taxes: \$ 2,336.18
Legal Description KATCHER 2ND SUB LOT 4 152890.006 94-03450 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,583	0	31,170	0	37,753		
	2024	6,490	0	33,643	0	40,133		

Land Fair Cash Val: 19,470 Building Fair Cash Val: 100,929 **Non-Farm Value: 120,399**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY SEN FREEZE OWNER OCCUPD	5000 9670 6000
2024	ELDERLY OWNER OCCUPD	5000 6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-105-005-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-105-005-02 200 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MIDLAND FIRE PROTECTION DIST

Address to send notice if different than shown at left:

PO BOX 739
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-105-005-02	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description KATCHER 2ND SUB LOTS 1 & 2 96-01131 ST DOC# 01-11-8 ST DOC# 97-11-1 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-12-10-105-005-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-106-001-00 302 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SHEARER ROY N

302 RIDGE ST
PO BOX 164
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,537** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-106-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 879.22	ESTIMATED			2024 Taxes: \$ 1,015.69
Legal Description KINCAID RICHARDSON & TWISTS SUBDIV LOTS 28 29 30 31 & 32 152916.000 2002R04629 200X79 12-10-B 2001R02636	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,165	0	24,771	0	30,936		
	2024	6,077	0	26,460	0	32,537		

Land Fair Cash Val: 18,231 Building Fair Cash Val: 79,380 **Non-Farm Value: 97,611**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	SEN FREEZE	7270
	OWNER OCCUPD	6000
	ELDERLY	5000
	IMPROVEMENT	1702
2024	SEN FREEZE	8871
	OWNER OCCUPD	6000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-106-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-106-005-00 312 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MICHEL ROBERT L & SHARON A (LSR)
FOR ALIC VANDERMAIDEN & TAYLOR SPARLI

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,924** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-106-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 721.56		ESTIMATED		2024 Taxes: \$ 876.00
Legal Description KINCAID RICHARDSON & TWISTS SUBDIV LTS 25 26 & 27 152911.000 B242 P274 120X79 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,701	0	11,297	0	14,998		
	2024	3,647	0	13,277	0	16,924		

Land Fair Cash Val: 10,941 Building Fair Cash Val: 39,831 **Non-Farm Value: 50,772**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000
2024	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/19/2013	\$27,500	2013R03211	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-106-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-106-006-00 318 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HATTENBACH KATRINA

318 RIDGE ST
PO BOX 1086
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,420** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-106-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,147.12		ESTIMATED		2024 Taxes: \$ 1,236.53
Legal Description KINCAID RICHARDSON & TWISTS SUBDIV LTS 22 23 24 2004R06464QCD 152908.000 130X79 12-10-B 2004R06463QCD	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,008	0	16,297	0	20,305		
	2024	3,950	0	17,470	0	21,420		

Land Fair Cash Val: 11,850 Building Fair Cash Val: 52,410 **Non-Farm Value: 64,260**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2000	\$50,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-106-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-106-007-00 322 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EMERSON ADAM J

Address to send notice if different than shown at left:

PO BOX 243
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,013** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-106-007-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 187.16		ESTIMATED		2024 Taxes: \$ 241.61
Legal Description KINCAID RICHARDSON & TWISTS SUBDIV LOTS 18 19 20 & 21 2002R08109 170X79' 152905.000 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,334	0	0	0	2,334		
	2024	3,013	0	0	0	3,013		

Land Fair Cash Val: 9,039 Building Fair Cash Val: 0 **Non-Farm Value: 9,039**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/22/2011	\$4,000	2011R03657	No
08/26/2020	\$15,000	2020R03270	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-106-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-106-008-00 406 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EMERSON ADAM J

Address to send notice if different than shown at left:

PO BOX 243
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,113** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-106-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 148.36		ESTIMATED 2024 Taxes: \$ 169.44	
Legal Description KINCAID RICHARDSON & TWISTS SUB LOT 16 & 17 MHRE 152904.000 2000-03716 60X79 12-10-B 81-35722 97-02989	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,850	0	0	0	1,850	
	2024	1,823	0	290	0	2,113	

Land Fair Cash Val: 5,469 Building Fair Cash Val: 870 **Non-Farm Value: 6,339**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/26/2020	\$15,000	2020R03270	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-106-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-106-009-00 410 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EMERSON ADAM J

Address to send notice if different than shown at left:

PO BOX 243
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,783** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-106-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,281.50		ESTIMATED		2024 Taxes: \$ 2,789.26
Legal Description KINCAID RICHARDSON & TWISTS SUBDIV LTS 12 13 14 15 152902.000 B257 P444 180X79 12-10-B 2000-03143	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,133	0	31,318	0	34,451		
	2024	3,090	0	37,693	0	40,783		

Land Fair Cash Val: 9,270 Building Fair Cash Val: 113,079 **Non-Farm Value: 122,349**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
05/05/2014	\$6,500	2014R01627	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-106-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-106-013-00 418 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SHOULDERS JEREMY

418 RIDGE ST
PO BOX 816
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,393** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-106-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,327.96		ESTIMATED		2024 Taxes: \$ 1,187.62
Legal Description KINCAID RICHARDSON & TWISTS SUBDIV LOTS 10 & 11 152898.000 MHRE 2004R07425 80X79 12-10-B 89-09444 99-05611 99-05264	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,465	0	20,095	0	22,560		
	2024	2,430	0	21,963	0	24,393		

Land Fair Cash Val: 7,290 Building Fair Cash Val: 65,889 **Non-Farm Value: 73,179**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD IMPROVEMENT	6000 3583

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/2004	\$53,000	2004R07425	No
07/25/2018	\$55,000	2018R02353	Yes
10/18/2022	\$58,900	2022R03801	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-106-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-106-015-00 500 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURVEY JOSEPH B & KERRY R (LSR)
FOR GUY & DEBRA CHOATE (LSE)

PO BOX 677
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,970** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-106-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,886.24		ESTIMATED	2024 Taxes: \$ 1,922.16
Legal Description KINCAID RICHARDSON & TWISTS SUBDIV LOT 7 8 & 9 120X79 2003R08996 152896.000 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,701	0	25,821	0	29,522	
	2024	3,647	0	26,323	0	29,970	

Land Fair Cash Val: 10,941 Building Fair Cash Val: 78,969 **Non-Farm Value: 89,910**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000
<u>Tax Year</u> 2024 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1995	\$58,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-106-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-106-016-00 506 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RICHARDSON JOSIANNE

Address to send notice if different than shown at left:

506 RIDGE ST
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,333** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-106-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 630.46		ESTIMATED	2024 Taxes: \$ 267.27
Legal Description KINCAID RICHARDSON & TWISTS SUBDIV LTS 4 5 & 6 90-05873 152893.000 B248/P447 120X79 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,701	0	10,161	0	13,862	
	2024	3,647	0	5,686	0	9,333	

Land Fair Cash Val: 10,941 Building Fair Cash Val: 17,058 **Non-Farm Value: 27,999**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/17/2022	\$28,000	2022R02258	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-106-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-106-018-00 512 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BECHELLI DONA J

Address to send notice if different than shown at left:

PO BOX 352
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,567** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-106-018-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,398.04		ESTIMATED	2024 Taxes: \$ 1,649.27	
Legal Description KINCAID RICHARDSON & TWISTS SUB LTS 1 2 & 3 152891.000 85-10393 120X79 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,701	0	13,733	0	17,434		
	2024	3,647	0	16,920	0	20,567		

Land Fair Cash Val: 10,941 Building Fair Cash Val: 50,760 **Non-Farm Value: 61,701**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-106-018-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-107-001-00 401 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WISE HOWARD E JR

Address to send notice if different than shown at left:

PO BOX 901
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,880** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-107-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 240.34	ESTIMATED			2024 Taxes: \$ 471.52
Legal Description KINCAID LTS 1 & 2 BLK 17 89-7801 152022.000 86-12312 100X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,942	0	7,055	0	10,997		
	2024	3,883	0	9,997	0	13,880		

Land Fair Cash Val: 11,649 Building Fair Cash Val: 29,991 **Non-Farm Value: 41,640**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000
Disabled Person	2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/29/2006	\$20,000	2006R04195	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-107-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-107-002-00 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WISE HOWARD E JR

Address to send notice if different than shown at left:

PO BOX 901
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,940** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-107-002-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 157.82		ESTIMATED 2024 Taxes: \$ 155.57	
Legal Description KINCAID LT 3 BLK 17 152024.000 50X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,968	0	0	0	1,968	
	2024	1,940	0	0	0	1,940	

Land Fair Cash Val: 5,820 Building Fair Cash Val: 0 **Non-Farm Value: 5,820**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/12/2015	\$3,900	2015R04381	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-107-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-107-003-00 305 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CUTLER SARAH &
RICHARD L SCHULTE
305 RIDGE ST
PO BOX 83
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,593** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-107-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,183.26	ESTIMATED			2024 Taxes: \$ 2,052.31
Legal Description KINCAID LOT 4 BLK 17 & PART OF VACATED ALLEY 2003R010082 2002R07994 2002R02686 2002R02683 1995R04682 1995R04623 50X134' 152025.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,034	0	31,192	0	33,226		
	2024	2,003	0	29,590	0	31,593		

Land Fair Cash Val: 6,009 Building Fair Cash Val: 88,770 **Non-Farm Value: 94,779**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
11/01/2005	\$61,400	2005R06181	No
03/10/2006	\$67,200	2006R01081	Yes
12/04/2007	\$78,639	2007R05888	No
11/05/2008	\$51,000	2008R05613	No
10/15/2019	\$81,000	2019R03566	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-107-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-107-003-01 409 BEECH ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

ALGER COREY R

Address to send notice if different than shown at left:

PO BOX 1127
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$42,563 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 14,430 Building Fair Cash Val: 113,259 Non-Farm Value: 127,689

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount. Rows for Tax Year 2023 and 2024, both showing OWNER OCCUPD with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Row: 03/15/2010, \$90,000, 2010R01005, No.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-107-003-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-107-003-02 415 BEECH ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PIEPER TIMOTHY P & DARLA G

415 BEECH ST
PO BOX 618
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$54,623** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-107-003-02	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,412.74		ESTIMATED		2024 Taxes: \$ 3,412.73
Legal Description KINCAID SWLY 1/2 LOT 13 & ALL LOTS 14 & 15 BLK 17 & PART OF VACATED ALLEY & PART OF LOT 30 BEG CENTERLINE SAID VACATED	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,932	0	46,626	0	53,558		
	2024	6,830	0	47,793	0	54,623		

Land Fair Cash Val: 20,490 Building Fair Cash Val: 143,379 **Non-Farm Value: 163,869**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY SEN FREEZE	6000 5000 1065

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2011	\$5,000	2011R02862	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-107-003-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-107-003-03 311 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

POP STEPHEN A

Address to send notice if different than shown at left:

PO BOX 61
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$43,617** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-107-003-03	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,651.12		ESTIMATED 2024 Taxes: \$ 1,651.12	
Legal Description KINCAID LOT 6 BLK 17 & PART OF VACATED ALLEY & KINCAID PART OF LOT 30 BLK 17 & 0.198AC TR 157.91X151.79' & 66X134.6'AV	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	10,289	0	31,048	0	41,337	
	2024	10,140	0	33,477	0	43,617	

Land Fair Cash Val: 30,420 Building Fair Cash Val: 100,431 **Non-Farm Value: 130,851**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	7747
	Disabled Person	2000
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	10027
	Disabled Person	2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1998	\$69,900		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-107-003-03

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-107-003-05 421 BEECH ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MORRIS MARK & MICHELLE

421 BEECH ST
PO BOX 34
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$55,077** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-107-003-05	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,836.70		ESTIMATED		2024 Taxes: \$ 3,935.49
Legal Description KINCAID LOTS 10 11 12 & NWLY 1/2 LOT 13 BLK 17 2002R00104 1995R04623 175X134' 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,121	0	46,724	0	53,845		
	2024	7,017	0	48,060	0	55,077		

Land Fair Cash Val: 21,051 Building Fair Cash Val: 144,180 **Non-Farm Value: 165,231**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/14/2005	\$152,500	2005R01421	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-107-003-05

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-107-003-06 425 BEECH ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COOPER BRYAN

Address to send notice if different than shown at left:

PO BOX 33
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$65,994** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-107-003-06	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,438.80		ESTIMATED 2024 Taxes: \$ 4,810.93	
Legal Description KINCAID LOTS 7 8 & 9 BLK 17 & PART OF VACATED ALLEY 2003R08204 156.9X134' 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	6,383	0	42,500	0	48,883	
	2024	6,290	0	59,704	0	65,994	

Land Fair Cash Val: 18,870 Building Fair Cash Val: 179,112 **Non-Farm Value: 197,982**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2003	\$12,000		Yes
11/02/2022	\$198,000	2022R04031	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-107-003-06

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-107-003-07 307 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURVEY BERNARD A & JANE E (LSR)
FOR JOLENE LANCASTER (LSE)

PO BOX 677
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,666** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-107-003-07	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,904.28		ESTIMATED		2024 Taxes: \$ 1,977.97
Legal Description KINCAID LOT 5 BLK 17 & PART OF VACATED ALLEY 2003R010082 2003R010081 2003R10080 50X134' 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,034	0	27,713	0	29,747		
	2024	2,003	0	28,663	0	30,666		

Land Fair Cash Val: 6,009 Building Fair Cash Val: 85,989 Non-Farm Value: 91,998

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000
2024	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/2003	\$82,500		Yes
05/26/2006	\$82,084	2006R02595	No
09/28/2012	\$69,000	2012R05428	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-107-003-07

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-107-004-00 405 BEECH ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RODDEN MICHAEL E

300 COMMONWEALTH AVE
PO BOX 565
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,247** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-107-004-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 130.96		ESTIMATED 2024 Taxes: \$ 100.00	
Legal Description KINCAID LOTS 19 & 20 EX S105' SW8' LOT 20 BLK 17 & PART OF VACATED ALLEY MHRE 1978R20346 82X134'AV 152040.000 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,633	0	0	0	1,633	
	2024	1,247	0	0	0	1,247	

Land Fair Cash Val: 3,741 Building Fair Cash Val: 0 **Non-Farm Value: 3,741**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/23/2007	\$9,000	2007R03609	Yes
09/26/2013	\$10,200	2013R04394	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-107-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-107-005-00 401 BEECH ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RODDEN MICHAEL E (LSR)
FOR CAMRYN LEWIS (LSE)

PO BOX 565
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,426** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-107-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 648.02	ESTIMATED			2024 Taxes: \$ 755.87
Legal Description KINCAID S105' SW 8' LOT 20 & ALL LOT 21 BLK 17 & PART OF VACATED ASH ST 2001R06435 1989R10677 53X125'AV & 33X130'AV 152042.000 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,550	0	12,531	0	14,081		
	2024	993	0	14,433	0	15,426		

Land Fair Cash Val: 2,979 Building Fair Cash Val: 43,299 **Non-Farm Value: 46,278**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000
2024	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2001	\$25,700		Yes
07/16/2010	\$32,000	2010R02999	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-107-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-107-006-00 400 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

WISE VERNON D & ANNA M

Address to send notice if different than shown at left:

PO BOX 658
KINCAID

IL 62540

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$2,003 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 6,009 Building Fair Cash Val: 0 Non-Farm Value: 6,009

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? (Sales History)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-107-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-107-006-01 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RODDEN MICHAEL E

Address to send notice if different than shown at left:

PO BOX 565
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,273** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-107-006-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,186.74		ESTIMATED		2024 Taxes: \$ 1,144.55
Legal Description KINCAID LOT 22 BLK 17 & NELY HALF OF VACATED ASH ST. & W1/2 VACATED 18' ALLEYWAY 110X134'AV 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,475	0	10,324	0	14,799		
	2024	4,410	0	9,863	0	14,273		

Land Fair Cash Val: 13,230 Building Fair Cash Val: 29,589 **Non-Farm Value: 42,819**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/26/2007	\$12,000	2007R03678	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-107-006-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-107-007-00 404 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WISE VERNON D & ANNA M

404 COMMONWELATH AVE
PO BOX 658
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,303** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-107-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,744.70	ESTIMATED			2024 Taxes: \$ 1,948.86
Legal Description KINCAID LTS 24 & 25 BLK 17 152045.000 88-2904 100X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,942	0	23,815	0	27,757		
	2024	3,883	0	26,420	0	30,303		

Land Fair Cash Val: 11,649 Building Fair Cash Val: 79,260 **Non-Farm Value: 90,909**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-107-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-107-008-00 408 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

RW RENTALS

Address to send notice if different than shown at left:

PO BOX 508
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$9,266 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated _____
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: RESIDENTIAL BUILDING REMOVED.

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 17,469 Building Fair Cash Val: 10,329 Non-Farm Value: 27,798

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes red arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? (Includes sales history data)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___/___/2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-107-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-107-009-00 414 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WOODCOCK CADEN E

Address to send notice if different than shown at left:

414 COMMONWEALTH AVE
KINCAID IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,331** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-107-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,359.22		ESTIMATED		2024 Taxes: \$ 2,191.68
Legal Description KINCAID LT 29 BLK 17 152050.000 50X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,968	0	20,982	0	22,950		
	2024	1,940	0	25,391	0	27,331		

Land Fair Cash Val: 5,820 Building Fair Cash Val: 76,173 **Non-Farm Value: 81,993**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/2016	\$54,900	2016R00383	No
05/25/2023	\$82,000	2023R01416	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-107-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-108-001-00 407 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BAJRAMI JACLYN H TRUSTEE

407 RIDGE ST
PO BOX 897
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$65,990 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 25,011 Building Fair Cash Val: 172,959 Non-Farm Value: 197,970

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year 2024. Row: IMPROVEMENT 4913

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Row: 11/07/2019, \$150,000, 2019R03940, Yes

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Row: Joy, Ed, Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-108-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-108-002-00 501 RICHARDSON KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROWNS RENTAL PROPERTIES LLC

7550 MINDER RD
ROCHESTER IL 62563

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$77,326** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-108-002-00	Class 0050	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 4,627.38		ESTIMATED	2024 Taxes: \$ 6,200.79
Legal Description KINCAID LTS 7 THRU 13 BLK 44 & E1/2 VACATED ALLEY 16 UNITS 268X134 ST DOC# 85-11-133 80-34139 2003R00369 VACATING	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	9,086	0	48,619	0	57,705	
	2024	8,953	0	68,373	0	77,326	

Land Fair Cash Val: 26,859 Building Fair Cash Val: 205,119 **Non-Farm Value: 231,978**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/15/2018	\$330,000	2018R03808	No
09/02/2022	\$464,000	2022R03228	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-108-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-108-003-00 410 PINE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRIS ALEK & HANNAH

Address to send notice if different than shown at left:

PO BOX 434
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$58,328** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-108-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,754.02		ESTIMATED		2024 Taxes: \$ 4,196.19
Legal Description KINCAID LTS 14 15 & 16 BLK 44 & PART OF VACATED ALLEY 152429.000 90-02506 129X134 12-10-B 2003R00369 VACATING ALLEY	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,246	0	41,568	0	46,814		
	2024	5,173	0	53,155	0	58,328		

Land Fair Cash Val: 15,519 Building Fair Cash Val: 159,465 **Non-Farm Value: 174,984**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	0
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/08/2008	\$115,000	2008R04149	Yes
01/13/2023	\$175,000	2023R00107	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-108-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-108-004-00 406 PINE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SELZER KATHY

406 PINE ST
PO BOX 974
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,017** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-10-108-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 830.86		ESTIMATED		2024 Taxes: \$ 1,034.77
Legal Description KINCAID LTS 17 & 18 BLK 44 & PART OF VACATED ALLEY 97-03577 152432.000 91-02508 80X134 12-10-B 2003R00369 VACATING ALLEY	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,252	0	13,109	0	16,361		
	2024	3,207	0	15,810	0	19,017		

Land Fair Cash Val: 9,621 Building Fair Cash Val: 47,430 **Non-Farm Value: 57,051**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD IMPROVEMENT	6000 113

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1997	\$18,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-108-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-108-005-00 400 PINE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PATTERSON CHRISTIAN & KAYLA

PO BOX 991
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$47,729** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: ASSESSMENT INCREASED DUE TO REMODELING. MAY QUALIFY FOR IMPROVEMENT EXEMPTION.

Parcel Number 15-12-10-108-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,827.84	ESTIMATED			2024 Taxes: \$ 2,295.44
Legal Description KINCAID LTS 19 & 20 BLK 44 & PART OF VACATED ALLEY 152433.000 2003R08395 69X134 12-10-B 1993R05535	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,805	0	51,563	0	54,368		
	2024	2,767	0	44,962	0	47,729		

Land Fair Cash Val: 8,301 Building Fair Cash Val: 134,886 **Non-Farm Value: 143,187**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 13104
2024	OWNER OCCUPD IMPROVEMENT	6000 13104

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/06/2005	\$93,000	2005R00077	Yes
07/05/2016	\$101,800	2016R02365	Yes
12/30/2020	\$130,000	2020R05275	Yes
05/15/2023	\$143,200	2023R01307	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-108-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-001-00 508 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ROGGERO ASHLEY

Address to send notice if different than shown at left:

PO BOX 112
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,347** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,061.80		ESTIMATED		2024 Taxes: \$ 829.73
Legal Description KINCAID LTS 37 & 38 BLK 13 152016.000 91-04298 134.1X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,283	0	13,958	0	19,241		
	2024	5,207	0	11,140	0	16,347		

Land Fair Cash Val: 15,621 Building Fair Cash Val: 33,420 **Non-Farm Value: 49,041**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/15/2017	\$43,000	2017R02972	No
08/29/2022	\$40,000	2022R03167	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-004-00 502 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

STUEMKE JARED & MELISSA

PO BOX 184
502 RICHARDSON ST
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,510** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,155.62		ESTIMATED	2024 Taxes: \$ 922.99
Legal Description KINCAID LOTS 35 & 36 BLK 13 152013.000 100X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,942	0	16,469	0	20,411	
	2024	3,883	0	13,627	0	17,510	

Land Fair Cash Val: 11,649 Building Fair Cash Val: 40,881 **Non-Farm Value: 52,530**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/06/2022	\$42,000	2022R02501	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-005-00 500 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TIPPITT ROBERT E & JANET CO TRUSTEES

500 RICHARDSON ST
PO BOX 285
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$42,926** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,994.26		ESTIMATED	2024 Taxes: \$ 2,560.15
Legal Description KINCAID N1/2 LT 33 & ALL LT 34 BLK 13 152011.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
71-201301 75X125 12-10-B	2023	2,953	0	34,603	0	37,556	
	2024	2,913	0	40,013	0	42,926	

Land Fair Cash Val: 8,739 Building Fair Cash Val: 120,039 **Non-Farm Value: 128,778**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	IMPROVEMENT	1687
2024	ELDERLY	5000
	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-006-00 410 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TILLEY PAUL A

410 RICHARDSON AVE
PO BOX 642
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,150** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 747.54		ESTIMATED 2024 Taxes: \$ 1,054.50	
Legal Description KINCAID LOT 32 & S1/2 LOT 33 152010.000 89-7617 75X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,953	0	19,369	0	22,322	
	2024	2,913	0	23,237	0	26,150	

Land Fair Cash Val: 8,739 Building Fair Cash Val: 69,711 **Non-Farm Value: 78,450**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
2024	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1989	\$16,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-007-00 408 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

OLINGER JOSEPH A

408 RICHARDSON AVE
PO BOX 682
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,417** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 831.58	ESTIMATED			2024 Taxes: \$ 995.72
Legal Description KINCAID LT 31 BLK 13 152009.000 2001-02044 50X125 12-10-B 86-15916 97-04668 97-04669	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,968	0	14,402	0	16,370		
	2024	1,940	0	16,477	0	18,417		

Land Fair Cash Val: 5,820 Building Fair Cash Val: 49,431 **Non-Farm Value: 55,251**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-008-00 406 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WATSON MICHAEL & VICKY

PO BOX 785
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,203** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,246.40		ESTIMATED	2024 Taxes: \$ 1,940.84	
Legal Description KINCAID LOTS 29 & 30 BLK 13 100X125' 2003R06488 152008.000 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,942	0	17,601	0	21,543		
	2024	3,883	0	26,320	0	30,203		

Land Fair Cash Val: 11,649 Building Fair Cash Val: 78,960 **Non-Farm Value: 90,609**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1994	\$29,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-010-00 400 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

ROGGERO NANCY

Address to send notice if different than shown at left:

PO BOX 828
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$56,420 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 11,649 Building Fair Cash Val: 157,611 Non-Farm Value: 169,260

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Lists exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-011-00 312 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WOODS DORIS

312 RICHARDSON AVE
PO BOX 1012
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,810** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,103.82	ESTIMATED			2024 Taxes: \$ 1,428.19
Legal Description KINCAID N20 LT 25 & ALL LT 26 BLK 13 98-08390 152005.000 95-03031 70X125 12-10-B 94-04483	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,756	0	18,443	0	21,199		
	2024	2,717	0	21,093	0	23,810		

Land Fair Cash Val: 8,151 Building Fair Cash Val: 63,279 **Non-Farm Value: 71,430**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 1434
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-012-00 308 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

RICHARDS LESTER

PO BOX 801
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$52,114 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 9,321 Building Fair Cash Val: 147,021 Non-Farm Value: 156,342

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount. Rows for Tax Year 2023 and 2024, both showing OWNER OCCUPD with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Rows for sales on 10/01/2002, 08/01/2012, and 10/30/2020.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-013-00 306 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WHITEHEAD ASHLEY M

PO BOX 464
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,117** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-109-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,509.42		ESTIMATED	2024 Taxes: \$ 1,372.62	
Legal Description KINCAID LT 23 BLK 13 152002.000 78-21913 50X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,968	0	22,855	0	24,823		
	2024	1,940	0	21,177	0	23,117		

Land Fair Cash Val: 5,820 Building Fair Cash Val: 63,531 **Non-Farm Value: 69,351**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1978	\$19,000		Yes
05/25/2016	\$62,610	2016R01882	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-014-00 304 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

THOMAS SALLY CATHRYN

304 N RICHARDSON AVE
PO BOX 101
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,373** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,055.52	ESTIMATED			2024 Taxes: \$ 2,195.05
Legal Description KINCAID LTS 21 & 22 BLK 13 152001.000 82-42560 100X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,942	0	27,691	0	31,633		
	2024	3,883	0	29,490	0	33,373		

Land Fair Cash Val: 11,649 Building Fair Cash Val: 88,470 **Non-Farm Value: 100,119**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-015-00 300 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BABBS TERRY E & DANETTE

300 RICHARDSON AVE
PO BOX 1017
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,790** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,357.14	ESTIMATED			2024 Taxes: \$ 1,426.58
Legal Description KINCAID LT 20 BLK 13 99-01096 151999.000 82-44268 50X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,968	0	20,956	0	22,924		
	2024	1,940	0	21,850	0	23,790		

Land Fair Cash Val: 5,820 Building Fair Cash Val: 65,550 **Non-Farm Value: 71,370**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/21/2007	\$57,500	2007R04090	Yes
12/19/2011	\$52,000	2011R05941	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-016-00 301 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FASSERO JAS E JR

301 NORTH AVE
PO BOX 534
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,520** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 419.40	ESTIMATED			2024 Taxes: \$ 419.39
Legal Description KINCAID LTS 18 & 19 BLK 13 151998.000 100X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,942	0	27,543	0	31,485		
	2024	3,883	0	28,637	0	32,520		

Land Fair Cash Val: 11,649 Building Fair Cash Val: 85,911 **Non-Farm Value: 97,560**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	15255
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	16290

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-017-00 305 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

REGION BANK DBA REGIONS MORTGAGE
% REGIONS BANK

215 FORREST ST
HATTIESBURG MS 39401

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,063** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-017-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,754.72		ESTIMATED	2024 Taxes: \$ 1,608.86
Legal Description KINCAID LOT 17 BLK 13 1998R06518 80X125' 151995.000 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,968	0	19,914	0	21,882	
	2024	1,940	0	18,123	0	20,063	

Land Fair Cash Val: 5,820 Building Fair Cash Val: 54,369 **Non-Farm Value: 60,189**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/30/2014	\$55,000	2014R05617	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-018-00 309 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FIAONI PHILLIP

Address to send notice if different than shown at left:

PO BOX 378
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,820** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-018-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,215.10		ESTIMATED		2024 Taxes: \$ 2,311.08
Legal Description KINCAID LTS 15 & 16 BLK 13 151994.000 B328/P592 100X125 12-10-B		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	3,942	0	29,681	0	33,623	
		2024	3,883	0	30,937	0	34,820	

Land Fair Cash Val: 11,649 Building Fair Cash Val: 92,811 **Non-Farm Value: 104,460**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/09/2013	\$82,500	2013R04059	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-018-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-020-00 403 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HART GARY L & KAY J

403 NORTH AVE
PO BOX 1036
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$51,683** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-109-020-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID LT 13 & 14 BLK 13 151992.000 100X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,938	0	29,341	0	33,279		
	2024	3,880	0	47,803	0	51,683		

Land Fair Cash Val: 11,640 Building Fair Cash Val: 143,409 **Non-Farm Value: 155,049**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled 70-100% Ve	22279
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled 70-100% Ve	23131
	IMPROVEMENT	17552

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-020-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-021-00 405 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L & VICKIE L

Address to send notice if different than shown at left:

PO BOX 55
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,497** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-021-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 722.36	ESTIMATED			2024 Taxes: \$ 1,483.28
Legal Description KINCAID LT 12 BLK 13 151991.000 2002-05879 50X125 12-10-B 89-10455	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,968	0	13,040	0	15,008		
	2024	1,940	0	16,557	0	18,497		

Land Fair Cash Val: 5,820 Building Fair Cash Val: 49,671 **Non-Farm Value: 55,491**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2002	\$40,000		Yes
01/04/2012	\$40,000	2012R00049	No
02/21/2012	\$20,000	2012R00886	No
03/04/2022	\$30,000	2022R00767	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-021-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-022-00 407 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FOLI DENNIS F & KATHLEEN

407 NORTH AVE
PO BOX 678
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,193** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-022-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,290.66	ESTIMATED			2024 Taxes: \$ 857.47
Legal Description KINCAID LT 11 BLK 13 151990.000 50X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,968	0	25,127	0	27,095		
	2024	1,940	0	30,253	0	32,193		

Land Fair Cash Val: 5,820 Building Fair Cash Val: 90,759 **Non-Farm Value: 96,579**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY SEN FREEZE IMPROVEMENT	6000 5000 8907 1593

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-022-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-023-00 411 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AVERY THOMAS W III & JESSICA

P O BOX
411 NORTH AVE
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$42,733** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-023-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,706.26		ESTIMATED		2024 Taxes: \$ 2,945.63
Legal Description KINCAID LTS 9 & 10 BLK 13 2003R05051 2002-07783 151988.000 91-02629 100X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,942	0	35,806	0	39,748		
	2024	3,883	0	38,850	0	42,733		

Land Fair Cash Val: 11,649 Building Fair Cash Val: 116,550 **Non-Farm Value: 128,199**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1991	\$36,500		Yes
09/24/2018	\$110,000	2018R03140	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-023-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-024-00 415 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WOOLSEY DARRELL & BRANDI

Address to send notice if different than shown at left:

PO BOX 945
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,666** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-024-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 78.36	ESTIMATED			2024 Taxes: \$ 40.10
Legal Description KINCAID LTS 7 & 8 BLK 13 MHRE 151986.000 85-11729 100X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,942	0	3,035	0	6,977		
	2024	3,883	0	1,783	0	5,666		

Land Fair Cash Val: 11,649 Building Fair Cash Val: 5,349 **Non-Farm Value: 16,998**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	5166

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1985	\$2,000		Yes
10/20/2008	\$11,500	2008R05300	No
07/26/2017	\$17,000	2017R02668	Yes
04/08/2022	\$17,000	2022R01295	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-024-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-025-00 501 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HAGAN CARLY & LUCAS

Address to send notice if different than shown at left:

PO BOX 1194
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,997** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-025-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,410.60		ESTIMATED 2024 Taxes: \$ 2,405.47	
Legal Description KINCAID LOTS 5 & 6 BLK 13 100X125 93-05294 99-05474 2002-04338 2002-3171 ST DOC# 85-11-19	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,942	0	32,119	0	36,061	
	2024	3,883	0	32,114	0	35,997	

Land Fair Cash Val: 11,649 Building Fair Cash Val: 96,342 **Non-Farm Value: 107,991**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1999	\$49,900		Yes
08/19/2005	\$68,400	2005R04731	Yes
12/04/2007	\$20,000	2007R05902	No
02/21/2013	\$79,000	2013R00850	Yes
04/30/2015	\$90,000	2015R01654	Yes
04/06/2022	\$108,000	2022R01256	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-025-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-109-027-00 511 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SELBY MELISSA L

511 NORTH AVE
PO BOX 743
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,883** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-109-027-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,383.22		ESTIMATED		2024 Taxes: \$ 3,759.56
Legal Description KINCAID LTS 1 2 3 & 4 BLK 13 2003R06201 151980.000 2002-04856 231.1X125 12-10-B		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	9,106	0	39,084	0	48,190	
		2024	8,973	0	43,910	0	52,883	

Land Fair Cash Val: 26,919 Building Fair Cash Val: 131,730 **Non-Farm Value: 158,649**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/14/2008	\$121,500	2008R05764	No
09/19/2019	\$100	2019R03207	No
01/21/2020	\$60,000	2020R500245	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-109-027-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-110-001-00 450 BEECH ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KNOERR JERRY LEE

450 BEECH ST
PO BOX 382
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,266** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-110-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,068.38		ESTIMATED	2024 Taxes: \$ 1,068.37	
Legal Description KINCAID LTS 1 & 2 BLK 43 2003R04809 QCD 2003R00687 152391.000 B294 P658 83X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,269	0	28,287	0	31,556		
	2024	3,223	0	29,043	0	32,266		

Land Fair Cash Val: 9,669 Building Fair Cash Val: 87,129 **Non-Farm Value: 96,798**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
	SEN FREEZE	5233
2024	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
	SEN FREEZE	5943

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-110-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-110-002-00 405 PINE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FULCHER MICHAEL W L

Address to send notice if different than shown at left:

3209 BRUNK DR
SPRINGFIELD IL 62712

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,364** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-110-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 468.72	ESTIMATED			2024 Taxes: \$ 590.52
Legal Description KINCAID LTS 3 & 4 BLK 43 152393.000 2002-02794 80X125 12-10-B 88-1653	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,674	0	3,171	0	5,845		
	2024	3,107	0	4,257	0	7,364		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 12,771 **Non-Farm Value: 22,092**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2002	\$24,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-110-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-110-003-00 413 PINE ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BERTOLDO BRIAN L & VICKIE L

Address to send notice if different than shown at left:

PO BOX 55
KINCAID

IL 62540

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$19,144 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 9,321 Building Fair Cash Val: 48,111 Non-Farm Value: 57,432

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Includes entry for Leasehold Owner with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes sales history for 09/01/2000 and 11/17/2021.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-110-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-110-003-01 411 PINE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURL CHAD D & KIMBERLY A

Address to send notice if different than shown at left:

PO BOX 833
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$55,264** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-110-003-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 4,028.20		ESTIMATED	2024 Taxes: \$ 3,950.49	
Legal Description KINCAID LOTS 5 & 6 BLK 43 (2003R10127 QCD) 2000-05278 80X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	53,083	0	56,233		
	2024	3,107	0	52,157	0	55,264		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 156,471 **Non-Farm Value: 165,792**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/15/2014	\$136,500	2015R03607	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-110-003-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-110-004-00 411 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HOSTO GREGORY M & JACQUELYN M

411 RICHARDSON AVE
PO BOX 677
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$45,036 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for Year, Homesite/Lots, Farm Land, Buildings, Farm Bldgs, and Total.

Land Fair Cash Val: 13,629 Building Fair Cash Val: 121,479 Non-Farm Value: 135,108

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Exemption History, Amount, Tax Year. Lists exemptions for 2023 and 2024.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Lists sales history for 2004 and 2018.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-110-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-110-005-00 405 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ENLOW DONALD L SR

Address to send notice if different than shown at left:

PO BOX 961
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,853** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-110-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,104.46		ESTIMATED		2024 Taxes: \$ 1,752.40
Legal Description KINCAID LTS 12 & 13 BLK 43 152403.000 97-04867 78X125 12-10-B		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	3,073	0	23,700	0	26,773	
		2024	3,030	0	31,823	0	34,853	

Land Fair Cash Val: 9,090 Building Fair Cash Val: 95,469 **Non-Farm Value: 104,559**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
2024	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-110-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-110-006-00 403 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L II

Address to send notice if different than shown at left:

1550 N 500 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,403** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-110-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 801.90	ESTIMATED			2024 Taxes: \$ 1,475.74
Legal Description KINCAID LOT 14 BLK 43 1990R03214 1990R02666 39X125' 152404.000 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,538	0	14,462	0	16,000		
	2024	1,513	0	16,890	0	18,403		

Land Fair Cash Val: 4,539 Building Fair Cash Val: 50,670 **Non-Farm Value: 55,209**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1987	\$8,250		Yes
08/15/2006	\$39,000	2006R03959	Yes
08/30/2012	\$40,000	2012R04851	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-110-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-110-007-00 401 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L & VICKIE L

Address to send notice if different than shown at left:

PO BOX 55
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,136** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-10-110-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 731.66		ESTIMATED		2024 Taxes: \$ 1,374.14
Legal Description KINCAID LOT 15 BLK 43 BK226 PG193 39X125' 152405.000 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,538	0	13,586	0	15,124		
	2024	1,513	0	15,623	0	17,136		

Land Fair Cash Val: 4,539 Building Fair Cash Val: 46,869 **Non-Farm Value: 51,408**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/28/2005	\$38,000	2005R04268	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-110-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-110-008-00 416 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEIKLE KEVIN & LAURA (LSR)
FOR AARON MEIKLE (LSE)

PO BOX 574
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,787** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-110-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,434.44	ESTIMATED			2024 Taxes: \$ 1,025.39
Legal Description KINCAID LTS 16 & 17 BLK 43 152406.000 80X125 12-10-B BK328 PG618	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	14,738	0	17,888		
	2024	3,107	0	15,680	0	18,787		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 47,040 **Non-Farm Value: 56,361**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2024 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-110-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-110-009-00 412 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BANK & TRUST COMPANY

401 N MADISON
PO BOX 410
LITCHFIELD

IL 62056

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,297** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-110-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,400.58		ESTIMATED	2024 Taxes: \$ 3,071.04
Legal Description KINCAID LTS 18 & 19 BLK 43 152409.000 2004R03968 80X125 12-10-B 1991R02279	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,150	0	26,786	0	29,936	
	2024	3,107	0	35,190	0	38,297	

Land Fair Cash Val: 9,321 Building Fair Cash Val: 105,570 **Non-Farm Value: 114,891**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
06/01/2004	\$80,000		Yes
11/30/2009	\$36,000	2009R06608	No
03/01/2024	\$114,900	2024R00570	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-110-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-110-009-00 412 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROWN ASHLEY R &
AUSTIN J KEY

PO BOX 265
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,297** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-110-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,400.58	ESTIMATED			2024 Taxes: \$ 3,071.04
Legal Description KINCAID LTS 18 & 19 BLK 43 152409.000 2004R03968 80X125 12-10-B 1991R02279	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	26,786	0	29,936		
	2024	3,107	0	35,190	0	38,297		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 105,570 **Non-Farm Value: 114,891**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2004	\$80,000		Yes
11/30/2009	\$36,000	2009R06608	No
03/01/2024	\$114,900	2024R00570	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-110-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-110-010-00 406 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FULCHER DEBRA L

Address to send notice if different than shown at left:

PO BOX 864
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$44,574** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-110-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,191.76		ESTIMATED	2024 Taxes: \$ 3,093.26
Legal Description KINCAID LTS 20 & 21 BLK 43 91-02534 152411.000 95-00404 80X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,150	0	30,182	0	33,332	
	2024	3,107	0	41,467	0	44,574	

Land Fair Cash Val: 9,321 Building Fair Cash Val: 124,401 **Non-Farm Value: 133,722**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-110-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-110-011-00 404 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

WATSON BARBARA

Address to send notice if different than shown at left:

PO BOX 133
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$25,731 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 8,619 Building Fair Cash Val: 68,574 Non-Farm Value: 77,193

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Lists exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows a sale on 02/01/2021 for \$76,000.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-110-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-110-012-00 400 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L & VICKIE L

Address to send notice if different than shown at left:

PO BOX 55
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,999** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-110-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 927.40	ESTIMATED			2024 Taxes: \$ 1,202.77
Legal Description KINCAID W6 LT 23 & ALL LT 24 BLK 43 152415.000 2002-06581 43X125 12-10-B 98-03875 83-48235	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,694	0	15,871	0	17,565		
	2024	1,670	0	13,329	0	14,999		

Land Fair Cash Val: 5,010 Building Fair Cash Val: 39,987 **Non-Farm Value: 44,997**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2002	\$52,000		Yes
08/27/2014	\$41,000	2014R03339	Yes
03/18/2022	\$45,000	2022R00973	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-110-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-111-001-00 300 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RODDEN MICHAEL E

300 COMMONWEALTH AVE
PO BOX 565
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$42,006** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-111-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,843.46	ESTIMATED			2024 Taxes: \$ 2,887.33
Legal Description KINCAID ALL BLK 16 & PART OF VACATED ASH ST MHRE 1999R03980 1993R01722 160X112X173' & 33X182'AV 152021.000 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,187	0	39,272	0	41,459		
	2024	2,153	0	39,853	0	42,006		

Land Fair Cash Val: 6,459 Building Fair Cash Val: 119,559 **Non-Farm Value: 126,018**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1993	\$5,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-111-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-112-001-00 315 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HILL RUSSELL & BARBARA I GARNER

P O BOX
315 EDISON ST
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$58,877** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-112-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 4,353.38	ESTIMATED			2024 Taxes: \$ 4,240.22
Legal Description KINCAID LTS 1 2 3 BLK 15 152019.000 2001-05584 150X105AV 12-10-B 80-33841 97-06359 152019.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,393	0	54,895	0	60,288		
	2024	5,317	0	53,560	0	58,877		

Land Fair Cash Val: 15,951 Building Fair Cash Val: 160,680 **Non-Farm Value: 176,631**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2001	\$125,000		Yes
09/02/2014	\$150,000	2014R03458	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-112-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-112-002-00 305 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HILL RUSSELL W &
BARBARA I GARNER

PO BOX 1152
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,336** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-112-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 720.28	ESTIMATED			2024 Taxes: \$ 668.47
Legal Description KINCAID LT 4 BLK 15 152020.000 92-3737 240X104X207 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	713	0	8,269	0	8,982		
	2024	703	0	7,633	0	8,336		

Land Fair Cash Val: 2,109 Building Fair Cash Val: 22,899 **Non-Farm Value: 25,008**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1992	\$1,500		Yes
12/14/2009	\$34,000	2009R06876	Yes
09/04/2015	\$23,000	2015R03518	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-112-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-113-001-00 310 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BURCHI ALAN & RENEE

PO BOX 138
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$49,926** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-113-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,090.86		ESTIMATED		2024 Taxes: \$ 3,362.05
Legal Description KINCAID LTS 24 25 & 26 BLK 42 152388.000 77-12232 117X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,611	0	41,933	0	46,544		
	2024	4,543	0	45,383	0	49,926		

Land Fair Cash Val: 13,629 Building Fair Cash Val: 136,149 **Non-Farm Value: 149,778**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled Person	6000 2000
2024	OWNER OCCUPD Disabled Person	6000 2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-113-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-113-002-00 308 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DELAY RODNEY & E DARLENE

308 EDISON AVE
PO BOX 1158
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$15,540 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 4,539 Building Fair Cash Val: 42,081 Non-Farm Value: 46,620

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Row for SEN FREEZE with amount 1412 and tax year 2023.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?. Rows for 10/26/2012 and 01/16/2013.

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-113-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-113-003-00 306 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AMOS DAVID

306 N EDISON AVE
PO BOX 681
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$42,217** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-113-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,093.38		ESTIMATED	2024 Taxes: \$ 2,904.25
Legal Description KINCAID LTS 21 & 22 BLK 42 152386.000 95-05767 78X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,073	0	29,032	0	32,105	
	2024	3,030	0	39,187	0	42,217	

Land Fair Cash Val: 9,090 Building Fair Cash Val: 117,561 **Non-Farm Value: 126,651**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-113-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-113-004-00 302 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

OLLER JACOB T

302 EDISON AVE
PO BOX 958
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,743** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-113-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 778.02	ESTIMATED			2024 Taxes: \$ 701.10
Legal Description KINCAID LTS 19 & 20 BLK 42 152383.000 2004R01870 78X125 12-10-B 91-01598 96-02085	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,073	0	12,629	0	15,702		
	2024	3,030	0	11,713	0	14,743		

Land Fair Cash Val: 9,090 Building Fair Cash Val: 35,139 **Non-Farm Value: 44,229**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/2004	\$40,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-113-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-113-005-00 402 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JONES JENNIFER J

402 GLEN ST
PO BOX 111
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,567** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-113-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 719.40		ESTIMATED		2024 Taxes: \$ 753.39
Legal Description KINCAID W15' LOT 17 & ALL LOT 18 BLK 42 2004R06799 57X147' 152382.000 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,416	0	12,555	0	14,971		
	2024	2,380	0	24,187	0	26,567		

Land Fair Cash Val: 7,140 Building Fair Cash Val: 72,561 **Non-Farm Value: 79,701**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD IMPROVEMENT	6000 11172

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1992	\$15,500		Yes
12/14/2004	\$20,000	2004R07814	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-113-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-113-006-00 406 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MORRISSEY THOMAS B & BARBARA

406 GLEN ST
PO BOX 402
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,074** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-113-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 964.94	ESTIMATED			2024 Taxes: \$ 1,529.55
Legal Description KINCAID ALL LT 16 & 17 EX W15 BLK 42 87-21343 152381.000 87-19984 71X147 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,012	0	20,224	0	23,236		
	2024	2,967	0	16,107	0	19,074		

Land Fair Cash Val: 8,901 Building Fair Cash Val: 48,321 **Non-Farm Value: 57,222**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY IMPROVEMENT	5000 203

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/18/2007	\$38,500	2007R06107	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-113-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-113-007-00 410 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MULVANEY ROBIN D & STEPHANIE M

410 GLEN ST
PO BOX 692
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,950** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-113-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,149.34	ESTIMATED			2024 Taxes: \$ 2,642.27
Legal Description KINCAID LTS 14 & 15 BLK 42 152378.000 2004R06085 86X147 12-10-B 1991R05880	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,647	0	29,156	0	32,803		
	2024	3,593	0	35,357	0	38,950		

Land Fair Cash Val: 10,779 Building Fair Cash Val: 106,071 **Non-Farm Value: 116,850**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1991	\$19,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-113-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-113-008-00 301 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEZZE ANTHONY & CHRISTINA

PO BOX 595
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,330** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-113-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,302.50		ESTIMATED	2024 Taxes: \$ 2,672.74	
Legal Description KINCAID LTS 12 & 13 BLK 42 152377.000 98-06499 78X125 12-10-B 91-02155 94-05880	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,073	0	25,640	0	28,713		
	2024	3,030	0	30,300	0	33,330		

Land Fair Cash Val: 9,090 Building Fair Cash Val: 90,900 **Non-Farm Value: 99,990**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1998	\$36,800		Yes
06/25/2018	\$70,000	2018R01999	Yes
03/10/2021	\$100,000	2021R00949	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-113-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-113-009-00 305 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

THOMAS THERESA P

305 RICHARDSON AVE
PO BOX 273
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,673** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-113-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,962.18		ESTIMATED	2024 Taxes: \$ 2,058.72	
Legal Description KINCAID LTS 10 & 11 BLK 42 152375.000 78X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,073	0	21,396	0	24,469		
	2024	3,030	0	22,643	0	25,673		

Land Fair Cash Val: 9,090 Building Fair Cash Val: 67,929 **Non-Farm Value: 77,019**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-113-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-113-010-00 311 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NOREUIL THOMAS

311 RICHARDSON AVE
PO BOX 931
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,357** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-113-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,251.46	ESTIMATED			2024 Taxes: \$ 851.62
Legal Description KINCAID LTS 8 & 9 BLK 42 92-3642 152372.000 B303 P268 78X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,073	0	23,533	0	26,606		
	2024	3,030	0	21,327	0	24,357		

Land Fair Cash Val: 9,090 Building Fair Cash Val: 63,981 **Non-Farm Value: 73,071**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2024 SEN FREEZE	2737

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/30/2018	\$65,000	2018R00322	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-113-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-113-011-00 315 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L & VICKIE L

Address to send notice if different than shown at left:

PO BOX 55
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,533** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-113-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,113.52	ESTIMATED			2024 Taxes: \$ 2,047.50
Legal Description KINCAID LTS 6 & 7 BLK 42 2000-07422 152370.000 78-23382 78X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,073	0	16,813	0	19,886		
	2024	3,030	0	22,503	0	25,533		

Land Fair Cash Val: 9,090 Building Fair Cash Val: 67,509 **Non-Farm Value: 76,599**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/2000	\$25,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-113-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-113-012-00 411 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L & VICKIE L

Address to send notice if different than shown at left:

PO BOX 55
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,527** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-113-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,434.92	ESTIMATED			2024 Taxes: \$ 1,886.63
Legal Description KINCAID LT 5 BLK 42 152369.000 86-13007 43X147 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,821	0	27,073	0	28,894		
	2024	1,797	0	32,730	0	34,527		

Land Fair Cash Val: 5,391 Building Fair Cash Val: 98,190 **Non-Farm Value: 103,581**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-113-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-113-013-00 409 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L & VICKIE L

Address to send notice if different than shown at left:

PO BOX 55
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,494** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-113-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 535.20	ESTIMATED			2024 Taxes: \$ 1,563.23
Legal Description KINCAID LT 4 BLK 42 152368.000 B187 P298 43X147 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,821	0	15,853	0	17,674		
	2024	1,797	0	17,697	0	19,494		

Land Fair Cash Val: 5,391 Building Fair Cash Val: 53,091 **Non-Farm Value: 58,482**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023	
ELDERLY	5000
Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/15/2011	\$48,000	2011R03061	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-113-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-113-014-00 407 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L & VICKIE L

Address to send notice if different than shown at left:

PO BOX 55
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,797** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-113-014-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 124.06		ESTIMATED 2024 Taxes: \$ 144.10	
Legal Description KINCAID LT 3 BLK 42 152367.000 93-02520 43X147 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,547	0	0	0	1,547	
	2024	1,797	0	0	0	1,797	

Land Fair Cash Val: 5,391 Building Fair Cash Val: 0 Non-Farm Value: 5,391

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1993	\$10,000		Yes
04/29/2014	\$2,663	2014R01540	No
09/28/2015	\$3,200	2015R03767	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-113-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-113-015-00 405 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILLER LORI B

Address to send notice if different than shown at left:

PO BOX 771
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,424** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-113-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 569.68	ESTIMATED			2024 Taxes: \$ 595.33
Legal Description KINCAID LT 2 BLK 42 152366.000 88-2801 43X147 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,821	0	5,283	0	7,104		
	2024	1,797	0	5,627	0	7,424		

Land Fair Cash Val: 5,391 Building Fair Cash Val: 16,881 **Non-Farm Value: 22,272**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1988	\$17,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-113-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-113-016-00 403 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

KERN LEWIS D

Address to send notice if different than shown at left:

PO BOX 855
KINCAID

IL 62540

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$21,213 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 5,259 Building Fair Cash Val: 58,380 Non-Farm Value: 63,639

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year 2023, Tax Year 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-113-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-114-001-00 301 BEECH ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AYMER WESLEY S & KELLY M

211 EDISON ST
PO BOX 1142
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,993** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-114-001-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 162.22		ESTIMATED 2024 Taxes: \$ 159.82	
Legal Description KINCAID LT 1 BLK 10 151959.000 59X94.73AV 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,023	0	0	0	2,023	
	2024	1,993	0	0	0	1,993	

Land Fair Cash Val: 5,979 Building Fair Cash Val: 0 Non-Farm Value: 5,979

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/29/2011	\$2,800	2011R03252	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-114-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-114-002-00 303 BEECH ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BALKE THOMAS M & DEBORAH

305 BEECH ST
PO BOX 1124
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,121** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-114-002-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 170.08	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID LT 2 BLK 10 98-05155 151960.000 98-04596 59X104AV 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,121	0	0	0	2,121		
	2024	2,121	0	0	0	2,121		

Land Fair Cash Val: 6,363 Building Fair Cash Val: 0 **Non-Farm Value: 6,363**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/05/2008	\$64,900	2008R02349	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-114-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-114-003-00 305 BEECH ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BALKE THOMAS M & DEBORAH

P O BOX
305 BEECH ST
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$26,463 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 12,909 Building Fair Cash Val: 66,480 Non-Farm Value: 79,389

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year 2023, Tax Year 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Sales History, Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-114-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-114-004-00 219 ASH ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LUMB ROBERT A & CATHY I

219 ASH ST
PO BOX 923
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,057** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-114-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,135.66		ESTIMATED	2024 Taxes: \$ 1,207.42	
Legal Description KINCAID LTS 4 & 5 BLK 10 151962.000 94-0228 84.5X118.46AV 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,258	0	16,904	0	20,162		
	2024	3,210	0	17,847	0	21,057		

Land Fair Cash Val: 9,630 Building Fair Cash Val: 53,541 **Non-Farm Value: 63,171**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/1994	\$19,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-114-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-114-006-00 211 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AYMER WESLEY S & KELLY M

211 EDISON AVE
PO BOX 1142
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$53,090** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-114-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,449.66	ESTIMATED			2024 Taxes: \$ 3,776.16
Legal Description KINCAID LOTS 6 & 7 & 8 BLK 10 44X141AV 44.2X136.05AV 151966.000 2004R04371 12-10-B 2001R02436	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,451	0	31,097	0	36,548		
	2024	5,370	0	47,720	0	53,090		

Land Fair Cash Val: 16,110 Building Fair Cash Val: 143,160 **Non-Farm Value: 159,270**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2001	\$35,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-114-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-114-007-00 207 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GRACE MICHAEL P

Address to send notice if different than shown at left:

PO BOX 748
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,983** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-114-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 601.12	ESTIMATED			2024 Taxes: \$ 640.16
Legal Description KINCAID LTS 9 & 10 BLK 10 151967.000 88X146AV 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,750	0	9,746	0	13,496		
	2024	3,693	0	10,290	0	13,983		

Land Fair Cash Val: 11,079 Building Fair Cash Val: 30,870 **Non-Farm Value: 41,949**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/12/2008	\$25,000	2008R01231	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-114-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-114-009-00 203 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEDEN ETHAN W &
MORGAN L SHEEDY

PO BOX 1115
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,662** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-114-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,662.80	ESTIMATED			2024 Taxes: \$ 3,741.84
Legal Description KINCAID LOTS 11 & 12 BLK 10 151970.000 87-22852 101X156.1AV 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,414	0	34,792	0	39,206		
	2024	4,347	0	48,315	0	52,662		

Land Fair Cash Val: 13,041 Building Fair Cash Val: 144,945 **Non-Farm Value: 157,986**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/06/2021	\$158,000	2021R05142	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-114-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-114-010-00 201 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GIVENS TIMOTHY & SARAH B

201 EDISON AVE
PO BOX 1084
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,330** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-114-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,381.52		ESTIMATED	2024 Taxes: \$ 2,351.98	
Legal Description KINCAID LT 13 BLK 10 151971.000 75-3103 164.3X50AV 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,247	0	25,981	0	28,228		
	2024	2,217	0	33,113	0	35,330		

Land Fair Cash Val: 6,651 Building Fair Cash Val: 99,339 **Non-Farm Value: 105,990**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY OWNER OCCUPD	5000 6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/13/2023	\$106,000	2023R03343	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-114-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-114-011-00 200 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LAS ASHLEY N

Address to send notice if different than shown at left:

PO BOX 1002
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,993** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-114-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,495.24		ESTIMATED		2024 Taxes: \$ 1,394.83
Legal Description KINCAID LT 14 BLK 10 151972.000 B217 P297 50X163 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,228	0	23,017	0	25,245		
	2024	2,193	0	21,800	0	23,993		

Land Fair Cash Val: 6,579 Building Fair Cash Val: 65,400 **Non-Farm Value: 71,979**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	599
2024	IMPROVEMENT	599

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/24/2015	\$59,750	2015R02439	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-114-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-114-012-00 202 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HELMS TIMOTHY

202 COMMONWEALTH AVE
PO BOX 1065
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,397** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-114-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 117.72		ESTIMATED		2024 Taxes: \$ 192.22
Legal Description KINCAID LOT 15 BLK 10 2004R03466 50X164'AV 151973.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,247	0	5,221	0	7,468		
	2024	2,217	0	6,180	0	8,397		

Land Fair Cash Val: 6,651 Building Fair Cash Val: 18,540 **Non-Farm Value: 25,191**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2004	\$25,000	2004R03466	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-114-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-114-013-00 204 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FASSERO RICK

204 N COMMONWEALTH AVE
PO BOX 323
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$36,757** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-10-114-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,145.26		ESTIMATED		2024 Taxes: \$ 2,466.41
Legal Description KINCAID LTS 16 & 17 BLK 10 151974.000 B271 P479 100X159AV 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,409	0	28,343	0	32,752		
	2024	4,347	0	32,410	0	36,757		

Land Fair Cash Val: 13,041 Building Fair Cash Val: 97,230 **Non-Farm Value: 110,271**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/19/2007	\$55,000	2007R06128	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-114-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-114-014-00 208 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FESSER BERTHA R

208 COMMONWEALTH AVE
PO BOX 176
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,423** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-114-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 327.98	ESTIMATED			2024 Taxes: \$ 327.98
Legal Description KINCAID LT 18 BLK 10 151977.000 61X141.8AV 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,559	0	20,830	0	23,389		
	2024	2,523	0	21,900	0	24,423		

Land Fair Cash Val: 7,569 Building Fair Cash Val: 65,700 **Non-Farm Value: 73,269**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	8299
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	9333

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-114-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-114-015-00 212 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ASBELL ANGELA S

PO BOX 1055
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$39,987** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-114-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,510.76	ESTIMATED			2024 Taxes: \$ 2,725.42
Legal Description KINCAID LTS 19 20 21 BLK 10 151978.000 73-7850 150.8X112.20 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,681	0	32,526	0	38,207		
	2024	5,600	0	34,387	0	39,987		

Land Fair Cash Val: 16,800 Building Fair Cash Val: 103,161 **Non-Farm Value: 119,961**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 897
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2011	\$90,000	2011R02866	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-114-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-115-001-00 210 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ISAACS JAMES LEE & VICKY JEAN

208 EDISON AVE
PO BOX 123
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$36,256** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-115-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID N12 LT 22 & ALL LTS 23 & 24 BLK 11 151850.000 92X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,627	0	31,564	0	35,191		
	2024	3,573	0	32,683	0	36,256		

Land Fair Cash Val: 10,719 Building Fair Cash Val: 98,049 **Non-Farm Value: 108,768**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled 70-100% Ve	24191
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled 70-100% Ve	25256

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-115-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-115-002-00 206 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BAJRAMI JACLYN H TRUSTEE

Address to send notice if different than shown at left:

PO BOX 897
KINCAID

IL 62540

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$3,780 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 5,169 Building Fair Cash Val: 6,171 Non-Farm Value: 11,340

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-115-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-115-003-00 202 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WATSON CHARLES & JENNIFER COLLINS

Address to send notice if different than shown at left:

PO BOX 296
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,224** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-115-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,284.02	ESTIMATED			2024 Taxes: \$ 1,443.58
Legal Description KINCAID LTS 19 & 20 BLK 11 97-05071 151846.000 73-9228 80X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	20,084	0	23,234		
	2024	3,107	0	22,117	0	25,224		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 66,351 **Non-Farm Value: 75,672**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 IMPROVEMENT	1222
<u>Tax Year</u> 2024 IMPROVEMENT	1222

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/2010	\$16,000	2010R00419	No
09/03/2019	\$20,000	2019R02926	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-115-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-115-004-00 400 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCCLINTOCK JACKIE M

400 PRAIRIE
PO BOX 716
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,510** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-115-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 625.16	ESTIMATED			2024 Taxes: \$ 897.17
Legal Description KINCAID LT 18 BLK 11 96-02519 151845.000 2000-01401 40X125 12-10-F B214 P225	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	13,543	0	15,118		
	2024	1,553	0	16,957	0	18,510		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 50,871 **Non-Farm Value: 55,530**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	1322
2024	IMPROVEMENT	1322

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/2000	\$30,000		Yes
12/09/2004	\$50,500	2004R07702	Yes
12/14/2009	\$11,900	2009R06882	No
02/11/2010	\$20,000	2010R00544	Yes
04/12/2013	\$25,000	2013R01552	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-115-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-115-005-00 404 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HUGHES ELIZABETH M

404 PRAIRIE ST
PO BOX 454
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,513** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-115-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,378.40	ESTIMATED			2024 Taxes: \$ 1,404.37
Legal Description KINCAID LTS 16 & 17 BLK 11 151843.000 86X131 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,463	0	19,726	0	23,189		
	2024	3,410	0	20,103	0	23,513		

Land Fair Cash Val: 10,230 Building Fair Cash Val: 60,309 **Non-Farm Value: 70,539**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/27/2016	\$40,000	2016R04061	No
06/14/2022	\$50,000	2022R02198	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-115-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-115-007-00 408 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LEE PHIIP H

Address to send notice if different than shown at left:

PO BOX 1043
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,967** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-115-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 637.28		ESTIMATED 2024 Taxes: \$ 799.26	
Legal Description KINCAID LOTS 14 & 15 BLK 11 2001R01114 86X131' 151841.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,463	0	10,484	0	13,947	
	2024	3,410	0	12,557	0	15,967	

Land Fair Cash Val: 10,230 Building Fair Cash Val: 37,671 **Non-Farm Value: 47,901**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/2001	\$45,000		Yes
01/11/2017	\$34,000	2017R00155	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-115-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-115-008-00 410 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LAWRENCE MICHAEL E

410 PRAIRIE ST
PO BOX 506
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,637** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-115-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,435.74	ESTIMATED			2024 Taxes: \$ 1,654.89
Legal Description KINCAID LT 13 BLK 11 151840.000 91-03327 43X131 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,731	0	24,173	0	25,904		
	2024	1,707	0	26,930	0	28,637		

Land Fair Cash Val: 5,121 Building Fair Cash Val: 80,790 **Non-Farm Value: 85,911**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled Person OWNER OCCUPD	2000 6000
2024	Disabled Person OWNER OCCUPD	2000 6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-115-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-115-010-00 203 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MATHON DONALD J

Address to send notice if different than shown at left:

509 E STEVENSON ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,297** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-115-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 997.66	ESTIMATED			2024 Taxes: \$ 1,066.29
Legal Description KINCAID LOTS 10 11 & 12 BLK 11 88-5033 151838.000 96-05984 120X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,729	0	7,712	0	12,441		
	2024	4,660	0	8,637	0	13,297		

Land Fair Cash Val: 13,980 Building Fair Cash Val: 25,911 **Non-Farm Value: 39,891**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/24/2020	\$7,000	2020R00282	No
05/14/2020	\$12,400	2020R01649	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-115-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-115-012-00 207 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SABO REBECCA

207 RICHARDSON AVE
PO BOX
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,665** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-115-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,458.18	ESTIMATED			2024 Taxes: \$ 1,336.37
Legal Description KINCAID LT 9 BLK 11 96-03963 151836.000 96-03777 40X125 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	16,609	0	18,184		
	2024	1,553	0	15,112	0	16,665		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 45,336 **Non-Farm Value: 49,995**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/19/2014	\$34,900	2014R00549	Yes
10/07/2015	\$44,000	2015R03897	Yes
06/08/2022	\$50,000	2022R02129	No
08/16/2024	\$50,000	2024R02437	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-115-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-115-013-00 209 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HP RENTALS LLC

Address to send notice if different than shown at left:

PO BOX 286
AUBURN

IL 62615

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,816** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-115-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,593.62	ESTIMATED			2024 Taxes: \$ 1,909.81
Legal Description KINCAID LOT 8 BLK 11 2004R01811 2004R00661 2001R00800 1996R06061 1993R04666 40X125' 151835.000 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	18,298	0	19,873		
	2024	1,553	0	22,263	0	23,816		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 66,789 **Non-Farm Value: 71,448**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/2004	\$57,500		Yes
11/04/2005	\$69,380	2005R06285	No
12/28/2005	\$44,500	2005R07254	No
03/27/2006	\$63,000	2006R01366	Yes
03/20/2015	\$25,000	2015R01037	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-115-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-115-014-00 211 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARTIN ERIC M & DEBORAH A

211 RICHARDSON AVE
PO BOX 573
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,000** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-115-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,967.40	ESTIMATED			2024 Taxes: \$ 2,165.14
Legal Description KINCAID LT 7 BLK 11 151834.000 2004R00728 40X125 12-10-B 76-6933 98-02754	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	28,959	0	30,534		
	2024	1,553	0	31,447	0	33,000		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 94,341 Non-Farm Value: 99,000

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/2004	\$74,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-115-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-115-015-00 213 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WALKER SHARLEEN M

213 RICHARDSON AVE
PO BOX 774
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,463** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-115-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID LOT 6 BLK 11 40X125' 151833.000 12-10-B		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	1,575	0	20,821	0	22,396	
		2024	1,553	0	21,910	0	23,463	

Land Fair Cash Val: 4,659 Building Fair Cash Val: 65,730 **Non-Farm Value: 70,389**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	Disabled 70-100% Ve OWNER OCCUPD ELDERLY	12463 6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/26/2007	\$53,000	2007R01441	No
03/26/2007	\$54,000	2007R01442	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-115-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-115-016-00 411 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DOBYNS HEATHER

411 GLEN ST
PO BOX 885
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,763** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-115-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 833.58	ESTIMATED			2024 Taxes: \$ 462.14
Legal Description KINCAID E1/2 LT 4 & ALL 5 BLK 11 151832.000 2001-07329 64.5X131 12-10-B 90-02511 95-00777 2000-04303	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,597	0	13,798	0	16,395		
	2024	2,560	0	9,203	0	11,763		

Land Fair Cash Val: 7,680 Building Fair Cash Val: 27,609 **Non-Farm Value: 35,289**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2001	\$47,000		Yes
02/26/2007	\$19,000	2007R00854	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-115-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-115-017-00 407 W GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

ETTER ZACHARY

Address to send notice if different than shown at left:

PO BOX 1063
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$27,631 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 7,680 Building Fair Cash Val: 75,213 Non-Farm Value: 82,893

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year 2023, Tax Year 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Sales History, Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-115-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-115-018-00 405 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

OLLER TERRI A
%DONNA M BAKER

PO BOX 411
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,427** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-115-018-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 829.74		ESTIMATED 2024 Taxes: \$ 916.33	
Legal Description KINCAID LT 2 BLK 11 151829.000 99-06401 43X131 12-10-B 99-04096 97-03703	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,731	0	14,616	0	16,347	
	2024	1,707	0	15,720	0	17,427	

Land Fair Cash Val: 5,121 Building Fair Cash Val: 47,160 **Non-Farm Value: 52,281**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/28/2005	\$42,000	200505533	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-115-018-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-115-019-00 403 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DUNCAN JACK G

403 GLEN ST
PO BOX 494
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,644** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-115-019-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID LT 1 BLK 11 151828.000 2001-03608 42X131 12-10-B 96-05934	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,689	0	15,563	0	17,252		
	2024	1,667	0	15,977	0	17,644		

Land Fair Cash Val: 5,001 Building Fair Cash Val: 47,931 **Non-Farm Value: 52,932**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	6252
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	6644

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-115-019-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-116-001-00 550 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KINCAID ELEMENTARY SCHOOL
DIST NO 14

PO BOX 14
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-116-001-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID ALL BLK 12 ST DOC# 85-11-190 151979.000 12-10-B	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-10-116-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-200-001-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MICHEL ROBERT L & SHARON A

Address to send notice if different than shown at left:

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,950** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: RESIDENTIAL BUILDING REMOVED.
RECALCULATION OF FARMLAND ASSESSMENT

Parcel Number 15-12-10-200-001-00	Class 0021	Acreage 39.500	Print Date 9/23/2024	2023 Taxes: \$ 1,015.66		ESTIMATED	2024 Taxes: \$ 1,103.09
Legal Description NE 1/4 NE 1/4 EX 1/2A SE COR 2000R00905 1995R00524 150088.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	13,765	0	0	13,765	
	2024	0	14,950	0	0	14,950	

15-12-10-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-200-002-00 510 N CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GESELL RICHARD

Address to send notice if different than shown at left:

PO BOX 657
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$59,764** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-200-002-00	Class 0011	Acreage 10.240	Print Date 9/23/2024	2023 Taxes: \$ 3,751.78		ESTIMATED		2024 Taxes: \$ 3,910.39
Legal Description KINCAID N700' BLKS 20 21 22 INCL VAC PROSPECT ST & PART SANGMON AVE EX FOR 2.205 ACRES 1977R16664 152055.000 12-10-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,569	2,619	47,528	3,070	57,786		
	2024	5,627	2,954	48,113	3,070	59,764		

15-12-10-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-200-002-01 506 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HENLEY JEFFREY W & STEPHANIE ANN

Address to send notice if different than shown at left:

PO BOX 1167
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$137,994** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-200-002-01	Class 0010	Acreage 2.205	Print Date 9/23/2024	2023 Taxes: \$ 8,619.72		ESTIMATED 2024 Taxes: \$ 10,584.63	
Legal Description BEG NW COR SE1/4 NE1/4 E32.99' S58.65' S99.84' S49.81' S50.33' S49.94' S35.58' TO POB E238.71' S341.61' W332.47' N56.35' N67.29' N47.85' N49.92' N49.86' N50.14'	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	7,531	0	105,960	0	113,491	
	2024	9,567	0	128,427	0	137,994	

Land Fair Cash Val: 28,701 Building Fair Cash Val: 385,281 **Non-Farm Value: 413,982**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-200-002-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-200-003-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DALY JAMES E REVOCABLE TRUST

Address to send notice if different than shown at left:

1347 N 1025 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,079** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-200-003-00	Class 0021	Acreage 4.390	Print Date 9/23/2024	2023 Taxes: \$ 154.22		ESTIMATED		2024 Taxes: \$ 166.72
Legal Description KINCAID PART BLKS 21 & 22 INCL VACATED PROSPECT ST & SANGAMON AVE 1994R03087 1994R03086 1972R02853 152056.000 12-10-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	1,923	0	0	1,923		
	2024	0	2,079	0	0	2,079		

15-12-10-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-201-001-00 620 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BECHELLI DONA J

Address to send notice if different than shown at left:

PO BOX 352
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$72,205** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-201-001-00	Class 0011	Acreage 8.000	Print Date 9/23/2024	2023 Taxes: \$ 390.32	ESTIMATED			2024 Taxes: \$ 407.44
Legal Description COM NW NE RN S86 RDS E246 N86 RDS W246 TO BEG 150087.000 91-05032 246X1419 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,637	2,790	51,175	2,500	64,102		
	2024	9,313	3,022	57,370	2,500	72,205		

15-12-10-201-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled 70-100% Ve	47812
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled 70-100% Ve	55683

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1991	\$17,600		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-201-002-00 640 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BECHELLI DONA J

Address to send notice if different than shown at left:

PO BOX 352
KINCAID

IL 62540

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$33,754 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-10-201-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 09/19/2005, \$55,000, 2005R05372, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-201-003-00 650 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARAS FRANK M & RETA DM

Address to send notice if different than shown at left:

PO BOX 416
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,130** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-201-003-00	Class 0010	Acreage 2.500	Print Date 9/23/2024	2023 Taxes: \$ 774.30	ESTIMATED			2024 Taxes: \$ 968.80
Legal Description PART OF NW1/4 NE1/4 150090.000 B255 P246 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	8,389	0	13,105	0	21,494		
	2024	10,200	0	13,930	0	24,130		

Land Fair Cash Val: 30,600 Building Fair Cash Val: 41,790 **Non-Farm Value: 72,390**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY OWNER OCCUPD	5000 6000
2024	ELDERLY OWNER OCCUPD	5000 6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-201-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-201-004-00 670 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARAS MICHAEL J

670 RIDGE ST
PO BOX 512
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,470** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-201-004-00	Class 0010	Acreage 0.500	Print Date 9/23/2024	2023 Taxes: \$ 1,006.96		ESTIMATED 2024 Taxes: \$ 1,289.03	
Legal Description E153.75' W553.25' N1419' NW EX E76.75' N1135' NW NE EX W 1.5AC 1990R05761 76.75X284' 150091.000 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,854	0	16,793	0	19,647	
	2024	3,517	0	19,953	0	23,470	

Land Fair Cash Val: 10,551 Building Fair Cash Val: 59,859 **Non-Farm Value: 70,410**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/1990	\$15,000		Yes
07/06/2006	\$5,000	2006R03291	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-201-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-201-005-00 690 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCCONNELL DEBRA KAYE

Address to send notice if different than shown at left:

PO BOX 253
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,535** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-201-005-00	Class 0011	Acreage 19.060	Print Date 9/23/2024	2023 Taxes: \$ 2,228.24		ESTIMATED	2024 Taxes: \$ 2,326.82
Legal Description PART OF NW1/4 NE1/4 150085.000 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,337	8,262	0	19,600	30,199	
	2024	2,953	8,982	0	19,600	31,535	

15-12-10-201-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/24/2018	\$30,000	2018R02341	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-201-006-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCCONNELL GARY & DEBBIE

Address to send notice if different than shown at left:

PO BOX 253
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,046** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-201-006-00	Class 0011	Acreage 0.380	Print Date 9/23/2024	2023 Taxes: \$ 372.10		ESTIMATED	2024 Taxes: \$ 372.32
Legal Description N110 OF TR 280N&S & 150E&W IN NW1/4 NW1/4 150091.001 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	43	0	5,000	5,043	
	2024	0	46	0	5,000	5,046	

15-12-10-201-006-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-201-007-00 680 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCCONNELL GARY & DEBBIE

Address to send notice if different than shown at left:

PO BOX 253
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$49,190** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-201-007-00	Class 0010	Acreage 0.590	Print Date 9/23/2024	2023 Taxes: \$ 3,152.04		ESTIMATED	2024 Taxes: \$ 3,463.41
Legal Description S170 TR 280 N&S & 150 E&W IN NW1/4 NE1/4 150091.002 150X110 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,369	0	41,938	0	45,307	
	2024	4,150	0	45,040	0	49,190	

Land Fair Cash Val: 12,450 Building Fair Cash Val: 135,120 **Non-Farm Value: 147,570**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-201-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-201-008-00 700 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCCONNELL QUENTIN W & CHRISTINE A

700 RIDGE ST
PO BOX 808
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$69,897** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-201-008-00	Class 0010	Acreage 1.150	Print Date 9/23/2024	2023 Taxes: \$ 4,985.02		ESTIMATED	2024 Taxes: \$ 5,123.91	
Legal Description BEG 307'W & 1139'S OF NE COR NW1/4 NE1/4 S280.35' W167.98' N199.95' W42' N80.39' E209.82' TO POB 150084.000 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,030	0	62,135	0	68,165		
	2024	7,350	0	62,547	0	69,897		

Land Fair Cash Val: 22,050 Building Fair Cash Val: 187,641 **Non-Farm Value: 209,691**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/24/2018	\$30,000	2018R02341	No
07/07/2020	\$160,000	2020R02441	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-201-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-201-009-00 710 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

POP DALTON E

PO BOX 971
710 RIDGE ST
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$49,340** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-201-009-00	Class 0010	Acreage 0.630	Print Date 9/23/2024	2023 Taxes: \$ 3,340.48		ESTIMATED		2024 Taxes: \$ 3,197.85
Legal Description S180 N1419 W153.5 E307 W1/2 E1/2 150084.001 76-8023 153.5X180 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,597	0	47,676	0	51,273		
	2024	4,430	0	44,910	0	49,340		

Land Fair Cash Val: 13,290 Building Fair Cash Val: 134,730 **Non-Farm Value: 148,020**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2019	\$125,000	2019R02091	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-201-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-201-010-00 720 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARCOGLIESE FRANK J JR & SHIRLEY

Address to send notice if different than shown at left:

PO BOX 141
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,631** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-201-010-00	Class 0011	Acreage 5.000	Print Date 9/23/2024	2023 Taxes: \$ 652.64		ESTIMATED		2024 Taxes: \$ 1,632.94
Legal Description BEG AT NE COR NW1/4 NE1/4 RN S86 RDS W153.5' N86 RDS E153.5' 1975R01278 154X1419' 150086.000 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,710	2,038	20,808	0	28,556		
	2024	7,033	2,225	26,373	0	35,631		

15-12-10-201-010-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	6211
	Disabled 30-49% Vete	2500
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled 30-49% Vete	2500

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-202-001-00 510 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BALLION KRIS

510 NORTH AVE
PO BOX 262
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,987** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-202-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,124.12		ESTIMATED		2024 Taxes: \$ 1,258.75
Legal Description KINCAID LTS 1 & 2 BLK 61 2003R04742 QCD 152868.000 105X150 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,496	0	15,812	0	20,308		
	2024	4,430	0	17,557	0	21,987		

Land Fair Cash Val: 13,290 Building Fair Cash Val: 52,671 **Non-Farm Value: 65,961**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 290
2024	OWNER OCCUPD IMPROVEMENT	6000 290

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/11/2021	\$38,000	2021R03379	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-202-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-202-002-00 504 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KEATING ELIZABETH J

504 NORTH AVE
PO BOX 163
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,536** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-202-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,995.70	ESTIMATED			2024 Taxes: \$ 2,047.74
Legal Description KINCAID LOTS 3 & 4 BLK 61 & PART OF VACATED ALLEY 2003R06962 1991R04043 105X158' 152870.000 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,631	0	26,256	0	30,887		
	2024	4,563	0	26,973	0	31,536		

Land Fair Cash Val: 13,689 Building Fair Cash Val: 80,919 **Non-Farm Value: 94,608**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2003	\$65,000		Yes
08/08/2007	\$80,000	2007R03883	Yes
06/28/2010	\$59,000	2010R02701	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-202-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-202-004-00 502 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCHULTE RICHARD L

502 NORTH AVE
PO BOX 175
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$46,567** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-202-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,928.88		ESTIMATED	2024 Taxes: \$ 3,253.08
Legal Description KINCAID LOTS 5 & 6 BLK 61 99-02277 152873.000 B157 P479 105.10X150 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,500	0	38,024	0	42,524	
	2024	4,437	0	42,130	0	46,567	

Land Fair Cash Val: 13,311 Building Fair Cash Val: 126,390 **Non-Farm Value: 139,701**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1999	\$60,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-202-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-202-005-00 404 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SASSATELLI JOSEPH P

Address to send notice if different than shown at left:

3518 FAIRLANE
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,517** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-202-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 748.98	ESTIMATED			2024 Taxes: \$ 1,565.07
Legal Description KINCAID LT 4 BLK 62 152787.000 75-2625 52.5X150 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,247	0	13,093	0	15,340		
	2024	2,217	0	17,300	0	19,517		

Land Fair Cash Val: 6,651 Building Fair Cash Val: 51,900 **Non-Farm Value: 58,551**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
11/28/2016	\$33,250	2016R04468	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-202-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-202-006-00 402 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

OLENSKI NICHOLSON LORI KRISTIN

110 W SECOND ST
PO BOX 422
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,953** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-202-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,381.92		ESTIMATED		2024 Taxes: \$ 1,279.27
Legal Description KINCAID LT 5 & 6 BLK 62 152879.000 105.05X150 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,500	0	12,733	0	17,233		
	2024	4,433	0	11,520	0	15,953		

Land Fair Cash Val: 13,299 Building Fair Cash Val: 34,560 **Non-Farm Value: 47,859**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-202-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-202-008-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SOUTH FORK COMM HIGH SCHOOL
DIST 14

PO BOX 20
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-202-008-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID LOTS 7 THRU 30 BLK 61 & LOTS 1 2 3 & 7 THRU 38 EX S104.80' & E34.29' OF LT 19 BLK 62 & PRT PROSPECT AVE 1992R03282	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-10-202-008-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/07/2017	\$3,500	2017R00508	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-202-009-00 628 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GROBOSKY ROSA D

628 OAK ST
PO BOX 619
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,506** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-202-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,690.50		ESTIMATED	2024 Taxes: \$ 1,208.47	
Legal Description KINCAID LTS 20 & 21 BLK 62 AND PART OF (34.29'x104.80') LOT 19 152881.000 80-32638 188.79X105.1 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,447	0	27,634	0	32,081		
	2024	4,383	0	30,123	0	34,506		

Land Fair Cash Val: 13,149 Building Fair Cash Val: 90,369 **Non-Farm Value: 103,518**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY SEN FREEZE	6000 5000 8436

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1980	\$44,900		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-202-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-202-010-00 407 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

TAYLOR JOE JR & DONNA

Address to send notice if different than shown at left:

1430 OLD POOR ROBIN RD
SYLVANIA GA 30467

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$18,998 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 16,881 Building Fair Cash Val: 40,113 Non-Farm Value: 56,994

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Row for 2023 Leasehold Owner with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?. Row for 03/30/2021, \$57,000, 2021R01271, Yes.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes handwritten values and names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-202-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-203-001-00 725 RIDGE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SEDLOCK GARY L & CAROL A

Address to send notice if different than shown at left:

PO BOX 860
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$83,016** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-203-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 5,140.28		ESTIMATED	2024 Taxes: \$ 5,774.98
Legal Description KINCAID LOT 2A BLK 19 & E1/2 PROSPECT AVE 1992R06466 1992R03282 194X400X450' 152053.000 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	12,720	0	62,381	0	75,101	
	2024	12,533	0	70,483	0	83,016	

Land Fair Cash Val: 37,599 Building Fair Cash Val: 211,449 **Non-Farm Value: 249,048**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-203-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-204-001-00 308 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BASIL KAYLA M

Address to send notice if different than shown at left:

PO BOX 202
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,227** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-204-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,920.06	ESTIMATED			2024 Taxes: \$ 2,744.67
Legal Description KINCAID GHERARDINI SUBDIV LT 4 152889.004 2004R01325 100X117.80 12-10-C 1974R15098	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,811	0	38,603	0	42,414		
	2024	3,757	0	36,470	0	40,227		

Land Fair Cash Val: 11,271 Building Fair Cash Val: 109,410 **Non-Farm Value: 120,681**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/2004	\$69,000		Yes
05/22/2007	\$84,000	2007R02481	Yes
07/21/2016	\$103,500	2016R02622	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-204-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-204-002-00 605 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GLOVER MICHAEL B & TONYA M

PO BOX 843
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$48,834** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-204-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,712.66		ESTIMATED	2024 Taxes: \$ 3,434.87
Legal Description KINCAID GHERARDINI SUBDIV LOT 2 152889.002 B4 P89 100X117.8 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,811	0	48,487	0	52,298	
	2024	3,757	0	45,077	0	48,834	

Land Fair Cash Val: 11,271 Building Fair Cash Val: 135,231 **Non-Farm Value: 146,502**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/27/2017	\$127,500	2017R01100	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-204-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-204-002-01 603 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREEN COURTNEE RAY & MATTHEW R

Address to send notice if different than shown at left:

PO BOX 353
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$70,993** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-204-002-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 4,946.14		ESTIMATED	2024 Taxes: \$ 5,211.80	
Legal Description KINCAID GHERARDINI SUBDIV LT 3 152889.003 2000-01900 100X117.8 12-10-C 99-05648 B4 P89 97-05002 98-06801	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,811	0	63,869	0	67,680		
	2024	3,757	0	67,236	0	70,993		

Land Fair Cash Val: 11,271 Building Fair Cash Val: 201,708 **Non-Farm Value: 212,979**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1999	\$3,000		Yes
07/26/2019	\$165,000	2019R02453	Yes
02/21/2024	\$213,000	2024R00460	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-204-002-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-204-003-00 609 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOORE JACKIE L

Address to send notice if different than shown at left:

PO BOX 447
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,130** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-204-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 724.12		ESTIMATED	2024 Taxes: \$ 724.12	
Legal Description KINCAID GHERARDINI SUBDIV LT 1 152889.001 86-14799 100X117.80 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,811	0	24,653	0	28,464		
	2024	3,757	0	25,373	0	29,130		

Land Fair Cash Val: 11,271 Building Fair Cash Val: 76,119 **Non-Farm Value: 87,390**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	8434
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	9100

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1986	\$36,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-204-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-204-004-00 613 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LUSH RONALD L

613 OAK ST
PO BOX 712
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,174** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-204-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,825.94	ESTIMATED			2024 Taxes: \$ 1,858.33
Legal Description KINCAID CUMMINGS SUBDIV LT 5 2003R04811 152884.004 98-01687 100X117.80 12-10-C 85-09246	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,811	0	24,959	0	28,770		
	2024	3,757	0	25,417	0	29,174		

Land Fair Cash Val: 11,271 Building Fair Cash Val: 76,251 **Non-Farm Value: 87,522**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/28/2005	\$57,000	2005R06124	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-204-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-204-005-00 615 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CUNITZ AMY LYNN

Address to send notice if different than shown at left:

1765 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,044** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-204-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 172.02		ESTIMATED		2024 Taxes: \$ 83.72
Legal Description KINCAID CUMMINGS SUBDIV LT 4 MHRE 152884.003 98-02809 100X117.80 12-10-C 89-6744	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,252	0	4,893	0	8,145		
	2024	3,207	0	3,837	0	7,044		

Land Fair Cash Val: 9,621 Building Fair Cash Val: 11,511 **Non-Farm Value: 21,132**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1998	\$16,000		Yes
12/19/2016	\$20,000	2016R04791	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-204-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-204-006-00 621 OAK ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LUSH DUSTIN & RONALD L

621 OAK ST
PO BOX 712
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,927** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: IMPROVEMENT ADDED, MAY QUALIFY FOR AN IMPROVEMENT EXEMPTION. CHECK WITH BOARD OF REVIEW. A REVALUATION OF PROPERTY.

Parcel Number 15-12-10-204-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 997.34		ESTIMATED 2024 Taxes: \$ 830.61	
Legal Description KINCAID CUMMINGS SUBDIV W1/2 LT 2 & ALL LT 3 152884.002 79-24510 150X117.80 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,882	0	14,124	0	19,006	
	2024	4,810	0	12,117	0	16,927	

Land Fair Cash Val: 14,430 Building Fair Cash Val: 36,351 **Non-Farm Value: 50,781**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 569
2024	OWNER OCCUPD IMPROVEMENT	6000 569

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/09/2020	\$47,000	2020R03939	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-204-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-204-007-00 375 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PERKINS JUDDSON W

375 CENTRAL AVE
PO BOX 645
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$39,130** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-204-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,754.22	ESTIMATED			2024 Taxes: \$ 2,656.70
Legal Description KINCAID CUMMINGS SUBDIV LOT 1 & E1/2 LOT 2 1998R06937 1978R18690 161.48X136.58'AV 152884.000 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,422	0	35,924	0	40,346		
	2024	4,357	0	34,773	0	39,130		

Land Fair Cash Val: 13,071 Building Fair Cash Val: 104,319 **Non-Farm Value: 117,390**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1998	\$88,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-204-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-204-008-00 638 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RIDGEWAY EDWIN E

Address to send notice if different than shown at left:

PO BOX 622
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,027** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-204-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 164.48		ESTIMATED 2024 Taxes: \$ 162.55	
Legal Description KINCAID CUMMINGS SUBDIV LT 9 MHRE 2004R05062 152884.008 149.56X106.86AV 12-10-C 94-7508	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,928	0	123	0	2,051	
	2024	1,900	0	127	0	2,027	

Land Fair Cash Val: 5,700 Building Fair Cash Val: 381 **Non-Farm Value: 6,081**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2004	\$18,000		Yes
07/15/2019	\$5,000	2019R02289	Yes
10/18/2022	\$5,000	2022R03788	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-204-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-204-009-00 634 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

RIDGEWAY EDWIN E & MARY L

Address to send notice if different than shown at left:

PO BOX 622
KINCAID

IL 62540

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$4,117 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for Year, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 5,700 Building Fair Cash Val: 6,651 Non-Farm Value: 12,351

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-204-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-204-010-00 626 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WITTY JUSTIN L

Address to send notice if different than shown at left:

205 GARRISON ST
BULPITT IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,140** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-204-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 273.06		ESTIMATED 2024 Taxes: \$ 412.18	
Legal Description KINCAID CUMMINGS SUBDIV LT 7 MHRE 152884.006 2001-04615 100X100 12-10-C 92-0942	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,928	0	1,477	0	3,405	
	2024	2,237	0	2,903	0	5,140	

Land Fair Cash Val: 6,711 Building Fair Cash Val: 8,709 **Non-Farm Value: 15,420**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1992	\$13,000		Yes
08/22/2007	\$12,000	2007R04129	Yes
01/29/2021	\$15,000	2021R00404	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-204-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-204-011-00 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

RAKERS BENJAMIN J

Address to send notice if different than shown at left:

PO BOX 114
KINCAID

IL 62540

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$2,067 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 6,201 Building Fair Cash Val: 0 Non-Farm Value: 6,201

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Includes sales from 2008, 2023, and 2024)

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-204-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-204-013-00 608 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FERRARI DANIEL & MARGARET

608 GLEN ST
PO BOX 616
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$57,033** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-204-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,301.92	ESTIMATED			2024 Taxes: \$ 3,691.40
Legal Description KINCAID GHERARDINI SUBDIV LOTS 6, 7 & 8 98-02752 152889.007 94.04004 300X100 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	8,992	0	43,184	0	52,176		
	2024	8,863	0	48,170	0	57,033		

Land Fair Cash Val: 26,589 Building Fair Cash Val: 144,510 **Non-Farm Value: 171,099**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1998	\$92,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-204-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-204-015-00 304 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROWN BRADEN &
AMBER GREEN

PO BOX 924
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$61,328** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-204-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,894.96		ESTIMATED		2024 Taxes: \$ 4,436.76
Legal Description KINCAID GHERARDINI SUBDIV LT 5 152889.005 91-03895 100X100 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,512	0	39,645	0	43,157		
	2024	3,460	0	57,868	0	61,328		

Land Fair Cash Val: 10,380 Building Fair Cash Val: 173,604 **Non-Farm Value: 183,984**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 1056
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/29/2009	\$83,000	2009R07122	Yes
07/03/2013	\$92,500	2013R02933	Yes
08/11/2022	\$184,000	2022R02983	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-204-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-205-001-00 350 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CREDI PATRICIA ANN

350 CENTRAL AVE
PO BOX 183
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,643** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-205-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID LT 1 BLK 23 152057.000 281X214X174 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,854	0	8,528	0	11,382		
	2024	2,813	0	7,830	0	10,643		

Land Fair Cash Val: 8,439 Building Fair Cash Val: 23,490 **Non-Farm Value: 31,929**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	382
2024	OWNER OCCUPD	6000
	ELDERLY	4643
	SEN FREEZE	0

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-205-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-001-00 601 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROCCARDO LOUIS II & LISA

601 GLEN ST
PO BOX 807
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$66,903** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-206-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID LTS 1 2 3 BLK 38 152253.000 2001-07958 120X125 12-10-C 97-06044 97-06043	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,729	0	60,504	0	65,233		
	2024	4,660	0	62,243	0	66,903		

Land Fair Cash Val: 13,980 Building Fair Cash Val: 186,729 **Non-Farm Value: 200,709**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled 70-100% Ve	6000 59233
2024	OWNER OCCUPD Disabled 70-100% Ve	6000 60903

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/2001	\$130,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-002-00 607 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREGORY MARC S & MELANIE S

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,553** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-206-002-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 126.30		ESTIMATED 2024 Taxes: \$ 124.54	
Legal Description KINCAID LT 4 BLK 38 152256.000 40X125 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,575	0	0	0	1,575	
	2024	1,553	0	0	0	1,553	

Land Fair Cash Val: 4,659 Building Fair Cash Val: 0 **Non-Farm Value: 4,659**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/05/2022	\$50,000	2022R01651	No
11/21/2023	\$54,000	2023R03464	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-004-00 611 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOSLEY JAMES G

Address to send notice if different than shown at left:

PO BOX 170
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,107** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-206-004-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 252.60		ESTIMATED 2024 Taxes: \$ 249.15	
Legal Description KINCAID LOTS 6 & 7 BLK 38 152258.000 2003R09740 80X125 12-10-C 85-8949 78-24410	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,150	0	0	0	3,150	
	2024	3,107	0	0	0	3,107	

Land Fair Cash Val: 9,321 Building Fair Cash Val: 0 **Non-Farm Value: 9,321**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/29/2022	\$5,000	2022R01545	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-004-01 609 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CARTER DEANNA L

609 GLEN ST
PO BOX 687
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,370** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-206-004-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 40.10		ESTIMATED	2024 Taxes: \$ 40.10	
Legal Description KINCAID LOT 5 MHRE 2003R09540 40X125 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	693	0	2,268		
	2024	1,553	0	817	0	2,370		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 2,451 **Non-Farm Value: 7,110**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	1768
2024	OWNER OCCUPD	1870

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-004-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-005-00 617 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MOSLEY JAMES G

Address to send notice if different than shown at left:

PO BOX 170
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$31,807 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 9,321 Building Fair Cash Val: 86,100 Non-Farm Value: 95,421

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-006-00 619 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BARTON KYLE T & KARISSA L

Address to send notice if different than shown at left:

PO BOX 686
KINCAID IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,670** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-206-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 995.48	ESTIMATED			2024 Taxes: \$ 1,039.18
Legal Description KINCAID LTS 10 & 11 BLK 38 152262.000 81-38035 80X125 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	24,975	0	28,125		
	2024	3,107	0	25,563	0	28,670		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 76,689 **Non-Farm Value: 86,010**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 9711
2024	OWNER OCCUPD IMPROVEMENT	6000 9711

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/09/2011	\$46,000	2011R02507	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-007-00 623 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JACOBS MICHAEL T

623 GLEN ST
PO BOX 214
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,300** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-206-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,333.24	ESTIMATED			2024 Taxes: \$ 1,307.10
Legal Description KINCAID LT 12 BLK 38 CFD IN FILE 152264.000 99-06895 40X125 12-10-C 99-06876 97-06044 97-06043	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	21,051	0	22,626		
	2024	1,553	0	20,747	0	22,300		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 62,241 **Non-Farm Value: 66,900**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/21/2005	\$15,000	2005R07147	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-008-00 627 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AVERY CAROLYN

627 GLEN ST
PO BOX 363
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,710** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-206-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 755.64	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID LTS 13 & 14 BLK 38 152266.000 2004R02050 80X125 12-10-C 81-35841	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	17,273	0	20,423		
	2024	3,107	0	14,603	0	17,710		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 43,809 **Non-Farm Value: 53,130**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY OWNER OCCUPD	5000 6000
2024	ELDERLY OWNER OCCUPD SEN FREEZE	5000 6000 6710

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-009-00 629 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RICE HARLIE
% EDWARD A & REBECCA J CLEETON

PO BOX 198
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,553** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-206-009-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 126.30		ESTIMATED 2024 Taxes: \$ 124.54	
Legal Description KINCAID LT 15 BLK 38 152267.000 93-05470 40X125 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,575	0	0	0	1,575	
	2024	1,553	0	0	0	1,553	

Land Fair Cash Val: 4,659 Building Fair Cash Val: 0 Non-Farm Value: 4,659

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1991	\$8,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-010-00 631 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RICE HARLIE
% EDWARD A & REBECCA J CLEETON

PO BOX 198
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,665** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-206-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 366.08	ESTIMATED			2024 Taxes: \$ 1,336.37
Legal Description KINCAID LOT 16 & W1/2 LOT 17 BLK 38 60X125' 152268.000 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,362	0	13,203	0	15,565		
	2024	2,330	0	14,335	0	16,665		

Land Fair Cash Val: 6,990 Building Fair Cash Val: 43,005 **Non-Farm Value: 49,995**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023	
Leasehold Owner	6000
ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/25/2024	\$50,000	2024R02184	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-011-00 635 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARTIN WALTER

Address to send notice if different than shown at left:

PO BOX 821
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,947** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-206-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 959.24	ESTIMATED			2024 Taxes: \$ 717.46
Legal Description KINCAID E 1/2 LOT 17 & ALL LOT 18 BLK 38 1994R07628 60X125' 152270.000 12-10-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,362	0	15,600	0	17,962		
	2024	2,330	0	12,617	0	14,947		

Land Fair Cash Val: 6,990 Building Fair Cash Val: 37,851 **Non-Farm Value: 44,841**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/1994	\$23,000	2020R03271	No
08/26/2020	\$15,000	2020R03271	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-012-00 637 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARTIN WALTER

Address to send notice if different than shown at left:

PO BOX 821
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,983** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-206-012-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 161.50		ESTIMATED 2024 Taxes: \$ 159.02	
Legal Description KINCAID LOT 19 BLK 38 152271.000 98-01003 50X130 12-10-C 95-05005 95-05662	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,014	0	0	0	2,014	
	2024	1,983	0	0	0	1,983	

Land Fair Cash Val: 5,949 Building Fair Cash Val: 0 **Non-Farm Value: 5,949**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-013-00 634 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MICHEL ROBERT L & SHARON A (LSR)
FOR KRISTEN ELLIS (LSE)

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,230** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-10-206-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 688.84	ESTIMATED			2024 Taxes: \$ 1,060.92
Legal Description KINCAID LTS 20 & 21 BLK 38 152273.000 95-3927 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,740	0	11,850	0	14,590		
	2024	2,700	0	16,530	0	19,230		

Land Fair Cash Val: 8,100 Building Fair Cash Val: 49,590 **Non-Farm Value: 57,690**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000
2024	Leasehold Owner	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1995	\$27,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-014-00 632 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FRAZIER ALFRED J & MADONNA

Address to send notice if different than shown at left:

PO BOX 283
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,843** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-206-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 126.70		ESTIMATED 2024 Taxes: \$ 126.70	
Legal Description KINCAID LTS 22 & 23 BLK 38 152274.000 86-18216 80X100 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,400	0	15,337	0	17,737	
	2024	2,363	0	17,480	0	19,843	

Land Fair Cash Val: 7,089 Building Fair Cash Val: 52,440 **Non-Farm Value: 59,529**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	5157
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	7263

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/1986	\$18,575		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-015-00 628 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FRAZIER SHEILA & PETE

Address to send notice if different than shown at left:

PO BOX 1074
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,043** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-206-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 497.98		ESTIMATED	2024 Taxes: \$ 497.98	
Legal Description KINCAID LOTS 24 25 & 26 BLK 38 120X100' 1997R03699 1995R01766 152276.000 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,212	0	17,847	0	22,059		
	2024	4,153	0	18,890	0	23,043		

Land Fair Cash Val: 12,459 Building Fair Cash Val: 56,670 **Non-Farm Value: 69,129**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	4849
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	5833

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-017-00 620 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SIMMONS EMMA M

Address to send notice if different than shown at left:

PO BOX 154
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,367** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-206-017-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID LTS 27 & 28 BLK 38 2003R00366 152280.000 86-14947 80X100 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,809	0	8,884	0	11,693		
	2024	2,770	0	9,597	0	12,367		

Land Fair Cash Val: 8,310 Building Fair Cash Val: 28,791 **Non-Farm Value: 37,101**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	693
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	1367

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/25/2011	\$18,000	2011R04827	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-018-00 616 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HARRIS MICHAEL

Address to send notice if different than shown at left:

PO BOX 263
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$46,613 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated _____
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024 valuations.

Land Fair Cash Val: 12,459 Building Fair Cash Val: 127,380 Non-Farm Value: 139,839

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Includes data for 03/14/2024 sale)

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___/___/2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-018-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-019-00 612 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RODDEN MICHAEL E & HEATHER S (LSR)
FOR ADAM WINGO (LSE)

PO BOX 565
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,233** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-206-019-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 478.98		ESTIMATED		2024 Taxes: \$ 660.21
Legal Description KINCAID LT 32 BLK 38 152284.000 94-6508 40X100 12-10-G 2002-00280 PLAT OF SURVEY	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,402	0	10,571	0	11,973		
	2024	1,383	0	12,850	0	14,233		

Land Fair Cash Val: 4,149 Building Fair Cash Val: 38,550 **Non-Farm Value: 42,699**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000
<u>Tax Year</u> 2024 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/05/2014	\$27,000	2014R05145	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-019-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-020-00 610 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CONRATH KELLY L

Address to send notice if different than shown at left:

PO BOX 416
EDINBURG

IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,830** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-206-020-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,489.06		ESTIMATED		2024 Taxes: \$ 1,590.17
Legal Description KINCAID LT 33 BLK 38 MHRE 152285.000 2001-05216 40X100 12-10-G 2002-00280 PLAT OF SURVEY 94-6508	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,402	0	17,167	0	18,569		
	2024	1,383	0	18,447	0	19,830		

Land Fair Cash Val: 4,149 Building Fair Cash Val: 55,341 **Non-Farm Value: 59,490**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-020-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-021-00 608 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREGORY MARC S & MELANIE S

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,446** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-206-021-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,079.76		ESTIMATED		2024 Taxes: \$ 1,318.81
Legal Description KINCAID LTS 34 & 35 BLK 38 152286.000 B205 P551 80X100 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,809	0	10,656	0	13,465		
	2024	2,770	0	13,676	0	16,446		

Land Fair Cash Val: 8,310 Building Fair Cash Val: 41,028 **Non-Farm Value: 49,338**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/13/2007	\$41,000	2007R04470	Yes
05/05/2022	\$50,000	2022R01651	No
11/21/2023	\$54,000	2023R03464	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-021-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-206-022-00 600 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BEAVERS DENNIS R & KAREN G

Address to send notice if different than shown at left:

PO BOX 236
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,644** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-10-206-022-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID LTS 36 37 & 38 BLK 38 2003R06199 152290.000 95-0747 100X120 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,856	0	23,918	0	27,774		
	2024	3,797	0	24,847	0	28,644		

Land Fair Cash Val: 11,391 Building Fair Cash Val: 74,541 **Non-Farm Value: 85,932**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled 70-100% Ve	16774
2024	Disabled 70-100% Ve	17644

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2003	\$68,250		Yes
05/09/2007	\$76,900	2007R02289	Yes
03/26/2010	\$12,016	2010R01255	No
02/08/2011	\$39,000	2011R00652	No
03/30/2015	\$85,500	2015R01173	No
12/13/2017	\$49,690	2017R04444	No

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials

_____ \$ _____ \$ _____

Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-206-022-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-211-001-00 224 EDINBURG ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ARGO GEORGE ALAN

Address to send notice if different than shown at left:

3211 VIGAL RD
SPRINGFIELD IL 62712

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,594** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-10-211-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 208.01
Legal Description KINCAID LTS 1 & 19 BLK 26 2MHRE 152079.001 89-6895 12-10-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,165	0	1,169	0	2,334		
	2024	1,147	0	1,447	0	2,594		

Land Fair Cash Val: 3,441 Building Fair Cash Val: 4,341 **Non-Farm Value: 7,782**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023	
OWNER OCCUPD	2234
ELDERLY	100
SEN FREEZE	0

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-211-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-211-002-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DALY JAMES E REVOCABLE TRUST

Address to send notice if different than shown at left:

1347 N 1025 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$645** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-211-002-00	Class 0021	Acreage 1.810	Print Date 9/23/2024	2023 Taxes: \$ 44.92		ESTIMATED 2024 Taxes: \$ 51.72	
Legal Description KINCAID LTS 4 THRU 10 BLK 26 72-2852 152079.000 94-3086&7 12-10-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	560	0	0	560	
	2024	0	645	0	0	645	

15-12-10-211-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-211-002-01 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF KINCAID

Address to send notice if different than shown at left:

PO BOX 615
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-211-002-01	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID LTS 11 THRU 17 BLK 26 ST DOC# 89-11-2 152079.003 12-10-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	
	2024	0	0	0	0	0	0	

15-12-10-211-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-211-002-02 803 GLEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ARGO GEORGE ALAN

Address to send notice if different than shown at left:

3211 VIGAL RD
SPRINGFIELD IL 62712

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,560** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-211-002-02	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 103.28	ESTIMATED			2024 Taxes: \$ 125.10
Legal Description KINCAID LOTS 2 & 3 BLK 26 75X144AV & 75X151.70AV 152079.004 2004R05357 MHRE 12-10-D 98-04002 2002R08830	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,141	0	147	0	1,288		
	2024	1,123	0	437	0	1,560		

Land Fair Cash Val: 3,369 Building Fair Cash Val: 1,311 **Non-Farm Value: 4,680**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-211-002-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-211-003-00 802 TERRACE PL KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

VILLAGE OF KINCAID

PO BOX 615
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$0 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed breakdown table for 2023 and 2024 with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-12-10-211-003-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line for valuation input.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 08/19/2021, \$800, 2021R03535, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-300-005-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MICHEL ROBERT L & SHARON A

Address to send notice if different than shown at left:

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,182** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-300-005-00	Class 0021	Acreage 11.130	Print Date 9/23/2024	2023 Taxes: \$ 694.54		ESTIMATED	2024 Taxes: \$ 736.31
Legal Description PART OF THE SW1/4 SW1/4 & MICHELS SUBDIV PLAT 3 LOTS 26-34 EX FOR MICHELS SUBDIV PLAT 1 & MICHELS SUB PLAT 2	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	8,661	0	0	8,661	
	2024	0	9,182	0	0	9,182	

15-12-10-300-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-301-001-00 104 S MAIN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LOCK JON

Address to send notice if different than shown at left:

PO BOX 497
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$727** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-301-001-00	Class 0064	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 57.74		ESTIMATED		2024 Taxes: \$ 58.30
Legal Description KINCAID N1/2 LT 15 & ALL 16 17 & 18 BLK 49 85-7954 96-06221 ST DOC# 13-11-1 152552.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	720	0	0	0	720		
	2024	727	0	0	0	727		

Land Fair Cash Val: 2,181 Building Fair Cash Val: 0 **Non-Farm Value: 2,181**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
10/01/1996	\$36,000		Yes
09/22/2015	\$602	2015R03694	No
03/18/2021	\$3,000	2021R01099	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-301-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-301-002-00 112 MAIN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MICHEL ROBERT L & SHARON A (LSR)
FOR NICHOLAS HAMENDE (LSE)

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,157** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-301-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 803.68	ESTIMATED			2024 Taxes: \$ 1,055.06
Legal Description KINCAID LTS 11 12 13 14 & S1/2 LT 15 BLK 49 152549.000 B200 P477 112.5X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,433	0	11,589	0	16,022		
	2024	4,367	0	14,790	0	19,157		

Land Fair Cash Val: 13,101 Building Fair Cash Val: 44,370 **Non-Farm Value: 57,471**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000
<u>Tax Year</u> 2024 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/23/2009	\$24,150	2009R05954	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-301-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-301-003-00 110 CHERRY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

THOMAS DOUGLAS A

Address to send notice if different than shown at left:

PO BOX 726
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,610** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-301-003-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 130.96		ESTIMATED 2024 Taxes: \$ 129.11	
Legal Description KINCAID LOT 10 BLK 49 152547.000 B292 P281 36X170AV 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,633	0	0	0	1,633	
	2024	1,610	0	0	0	1,610	

Land Fair Cash Val: 4,830 Building Fair Cash Val: 0 **Non-Farm Value: 4,830**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/12/2006	\$4,000	2006R05096	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-301-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-301-005-00 114 CHERRY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

THOMAS DOUGLAS A

Address to send notice if different than shown at left:

PO BOX 726
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,134** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-301-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,527.86		ESTIMATED	2024 Taxes: \$ 1,694.74	
Legal Description KINCAID LOTS 7 8 & 9 BLK 49 88-5059 88-5170 152545.000 91-04394 180X148AV 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,562	0	22,491	0	27,053		
	2024	4,497	0	24,637	0	29,134		

Land Fair Cash Val: 13,491 Building Fair Cash Val: 73,911 **Non-Farm Value: 87,402**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled Person	6000 2000
2024	OWNER OCCUPD Disabled Person	6000 2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-301-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-301-006-00 118 CHERRY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

THOMAS MERLE A

Address to send notice if different than shown at left:

PO BOX 915
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,550** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-301-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,512.16		ESTIMATED		2024 Taxes: \$ 1,567.72
Legal Description KINCAID W1/2 LT 5 & ALL LT 6 BLK 49 152543.000 82-43721 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,990	0	16,867	0	18,857		
	2024	1,960	0	17,590	0	19,550		

Land Fair Cash Val: 5,880 Building Fair Cash Val: 52,770 **Non-Farm Value: 58,650**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-301-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-301-007-00 122 CHERRY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

THOMAS MERLE A

Address to send notice if different than shown at left:

PO BOX 915
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,523** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-301-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 205.30		ESTIMATED		2024 Taxes: \$ 202.32
Legal Description KINCAID LT 4 & E1/2 LT 5 BLK 49 152541.000 91-01380 52.5X93.45AV 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,231	0	1,329	0	2,560		
	2024	1,213	0	1,310	0	2,523		

Land Fair Cash Val: 3,639 Building Fair Cash Val: 3,930 **Non-Farm Value: 7,569**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-301-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-301-008-00 126 CHERRY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCALLIONS CANDACE

Address to send notice if different than shown at left:

755 N PARK AVE
CHATHAM

IL 62629

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,514** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-301-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 723.56		ESTIMATED 2024 Taxes: \$ 602.55	
Legal Description KINCAID LOTS 1 2 & 3 BLK 49	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
CFD 96 152539.000 95-03480 187.2X71.05AV 12-10-E	2023	3,343	0	5,680	0	9,023	
	2024	3,297	0	4,217	0	7,514	

Land Fair Cash Val: 9,891 Building Fair Cash Val: 12,651 **Non-Farm Value: 22,542**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1995	\$5,000		Yes
12/19/2005	\$2,800	2005R07073	Yes
09/28/2006	\$2,000	2006R04801	No
10/29/2018	\$22,000	2018R03581	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-301-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-302-001-00 200 S MAIN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ROSSER RALPH &
SUSAN HOKASZEWSKI

PO BOX 797
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,632** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-302-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,514.08	ESTIMATED			2024 Taxes: \$ 852.58
Legal Description KINCAID LOT 18 & W1/2 LOT 19 BLK 50 152572.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
90-00953 64.5X125 12-10-E	2023	2,543	0	22,338	0	24,881		
	2024	2,503	0	19,129	0	21,632		

Land Fair Cash Val: 7,509 Building Fair Cash Val: 57,387 **Non-Farm Value: 64,896**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	0
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1990	\$47,500		Yes
10/07/2015	\$42,000	2015R03881	Yes
11/28/2022	\$64,900	2022R04270	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-302-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-302-002-00 105 CHERRY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KIRCHHOFF MICHAEL R

105 CHERRY ST
PO BOX 873
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,180** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-302-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,648.72		ESTIMATED	2024 Taxes: \$ 1,858.81	
Legal Description KINCAID E1/2 LOT 19 & ALL LOT 20 BLK 50 2002-01029 152573.000 52.5X125 12-10-E 90-03222	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,068	0	24,492	0	26,560		
	2024	2,040	0	27,140	0	29,180		

Land Fair Cash Val: 6,120 Building Fair Cash Val: 81,420 **Non-Farm Value: 87,540**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/17/2009	\$60,000	2009R03557	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-302-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-302-003-00 107 CHERRY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VACKER CHRISTIAN J & KERRY LEIGH

Address to send notice if different than shown at left:

PO BOX 976
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,297** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-302-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 508.58	ESTIMATED			2024 Taxes: \$ 745.53
Legal Description KINCAID LT 21 BLK 50 152575.000 78-22953 35X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,378	0	10,964	0	12,342		
	2024	1,360	0	13,937	0	15,297		

Land Fair Cash Val: 4,080 Building Fair Cash Val: 41,811 **Non-Farm Value: 45,891**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1978	\$20,000		Yes
04/26/2010	\$5,000	2010R01767	No
04/26/2010	\$15,000	2010R01768	No
01/30/2017	\$135,000	2017R00370	No
08/31/2021	\$42,000	2021R03739	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-302-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-302-004-00 109 CHERRY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COY CODY J &
JAMES L & DEBRA A NOREUIL

PO BOX 124
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,047** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-302-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 822.68	ESTIMATED			2024 Taxes: \$ 885.86
Legal Description KINCAID LOTS 22 23 & 24 BLK 50 1972R01012 152576.000 2001R01873 105X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,138	0	12,121	0	16,259		
	2024	4,077	0	12,970	0	17,047		

Land Fair Cash Val: 12,231 Building Fair Cash Val: 38,910 **Non-Farm Value: 51,141**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-302-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-302-007-00 115 CHERRY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BIG MANGROVE LLC

STE 508
301 THELMA DR
CASPER WY 82609

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,033** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-302-007-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 82.84
Legal Description KINCAID LTS 25 & 26 BLK 50 99-07907 152580.000 95-4832 70X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	11	0	0	0	11	
	2024	1,033	0	0	0	1,033	

Land Fair Cash Val: 3,099 Building Fair Cash Val: 0 **Non-Farm Value: 3,099**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-302-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-302-008-00 119 CHERRY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BIG MANGROVE LLC

STE 508
301 THELMA DR
CASPER WY 82609

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$377** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-302-008-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 30.23
Legal Description KINCAID LT 27 BLK 50 152581.000 35X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	11	0	0	0	11	
	2024	377	0	0	0	377	

Land Fair Cash Val: 1,131 Building Fair Cash Val: 0 **Non-Farm Value: 1,131**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-302-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-302-009-00 125 CHERRY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRIS ALEXANDRIA

Address to send notice if different than shown at left:

PO BOX 724
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$49,995** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-302-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,050.42	ESTIMATED			2024 Taxes: \$ 3,527.97
Legal Description KINCAID LTS 28 THRU 31 & W1/2 LOT 32 BLK 50 BK227 PG83 152582.000 2004R03567 157.5X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,206	0	12,893	0	19,099		
	2024	6,113	0	43,882	0	49,995		

Land Fair Cash Val: 18,339 Building Fair Cash Val: 131,646 **Non-Farm Value: 149,985**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/28/2005	\$30,000	2005R06121	No
06/04/2010	\$60,000	2010R02342	No
07/29/2010	\$31,000	2010R03205	No
01/30/2017	\$135,000	2017R00370	No
11/28/2023	\$50,000	2023R03506	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-302-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-302-011-00 131 CHERRY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HUNTER BOBBIE L

Address to send notice if different than shown at left:

PO BOX 1042
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,664** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: IMPROVEMENT ADDED, MAY QUALIFY FOR AN IMPROVEMENT EXEMPTION. CHECK WITH BOARD OF REVIEW. A REVALUATION OF PROPERTY.

Parcel Number 15-12-10-302-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,106.76		ESTIMATED	2024 Taxes: \$ 1,626.66
Legal Description KINCAID E1/2 LOT 32 & ALL LOTS 33 & 34 BLK 50 152587.000 87-23555 87.5X125 12-10-E 1984R03501	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,445	0	29,206	0	32,651	
	2024	3,397	0	23,267	0	26,664	

Land Fair Cash Val: 10,191 Building Fair Cash Val: 69,801 **Non-Farm Value: 79,992**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	379
2024	IMPROVEMENT	379

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/19/2006	\$25,750	2006R04585	Yes
09/30/2014	\$15,000	2014R04007	No
06/11/2018	\$84,900	2018R01830	No
12/13/2021	\$85,000	2021R05250	Yes
08/30/2023	\$80,000	2023R02444	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-302-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-302-013-00 132 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WICKS TEAGAN

PO BOX
132 CHESTNUT ST
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,332** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-302-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 839.84	ESTIMATED			2024 Taxes: \$ 988.91
Legal Description KINCAID LTS 1 & 2 BLK 50 2003R09880 QCD 152555.000 81-35645 70X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,756	0	13,717	0	16,473		
	2024	2,717	0	15,615	0	18,332		

Land Fair Cash Val: 8,151 Building Fair Cash Val: 46,845 **Non-Farm Value: 54,996**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/12/2015	\$28,300	2015R00128	Yes
10/29/2021	\$55,000	2021R04605	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-302-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-302-014-00 122 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MOORE JUSTIN L & CHELSEA L

122 CHESTNUT ST
PO BOX 373
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$25,087 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 18,321 Building Fair Cash Val: 56,940 Non-Farm Value: 75,261

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Exemption History, Amount, Tax Year. Shows 2023 and 2024 exemptions for OWNER OCCUPD at 6000.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows a sale on 07/02/2020 for \$70,000 with Doc# 2020R02383 and Qualified? Yes.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-302-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-302-016-00 118 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ELMORE DONALD E

Address to send notice if different than shown at left:

PO BOX 473
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,074** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-302-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 576.58	ESTIMATED			2024 Taxes: \$ 576.57
Legal Description KINCAID LOTS 7 8 & 9 BLK 50 152562.000 1979R27207 105X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,138	0	19,488	0	23,626		
	2024	4,077	0	19,997	0	24,074		

Land Fair Cash Val: 12,231 Building Fair Cash Val: 59,991 **Non-Farm Value: 72,222**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	5436
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	5884

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-302-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-302-017-00 114 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

PHILLIPS DEAN L & AMY ANN

114 CHESTNUT ST
PO BOX 995
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$25,370 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 8,151 Building Fair Cash Val: 67,959 Non-Farm Value: 76,110

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Exemption History, Amount, Tax Year 2023, Tax Year 2024.

Table with columns: Sales History, Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-302-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-302-018-00 110 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MICHEL ROBERT L & SHARON A (LSR)
FOR TAHRA ANDREWS (LSE)

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,043** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-302-018-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 633.98	ESTIMATED			2024 Taxes: \$ 805.35
Legal Description KINCAID LT 12 & E1/2 13 BLK 50 96-07569 152566.000 86-14156 52.5X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,068	0	11,838	0	13,906		
	2024	2,040	0	14,003	0	16,043		

Land Fair Cash Val: 6,120 Building Fair Cash Val: 42,009 **Non-Farm Value: 48,129**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000
<u>Tax Year</u> 2024 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/1996	\$7,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-302-018-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-302-019-00 106 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

OSBORN SANDRA

106 CHESTNUT ST
PO BOX 1003
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,460** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-302-019-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,097.72		ESTIMATED	2024 Taxes: \$ 999.17
Legal Description KINCAID W1/2 LT 13 & ALL LT 14 BLK 50 152568.000 2004R05066 52.5X125 12-10-E 75-1736	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,068	0	17,621	0	19,689	
	2024	2,040	0	16,420	0	18,460	

Land Fair Cash Val: 6,120 Building Fair Cash Val: 49,260 **Non-Farm Value: 55,380**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/01/2004	\$71,000		Yes
08/30/2018	\$31,500	2018R02834	No
04/18/2019	\$48,000	2019R01158	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-302-019-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-302-020-00 104 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NOREUIL JAMES L & DEBRA A

Address to send notice if different than shown at left:

PO BOX 124
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,360** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-302-020-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 110.50		ESTIMATED 2024 Taxes: \$ 109.06	
Legal Description KINCAID LT 15 BLK 50 152569.000 88-2876 35X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,378	0	0	0	1,378	
	2024	1,360	0	0	0	1,360	

Land Fair Cash Val: 4,080 Building Fair Cash Val: 0 **Non-Farm Value: 4,080**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1988	\$500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-302-020-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-302-021-00 100 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MESKIL JACOB

Address to send notice if different than shown at left:

PO BOX 1093
KINCAID

IL 62540

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$19,120 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for Year, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 9,210 Building Fair Cash Val: 48,150 Non-Farm Value: 57,360

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-302-021-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-303-001-00 200 HIGHLAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AMEREN ILLINOIS COMPANY
MC 210

PO BOX 66149
SAINT LOUIS MO 63166

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,072** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-303-001-00	Class 0060	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,095.48		ESTIMATED		2024 Taxes: \$ 1,128.44
Legal Description KINCAID LT 10 BLK 48 P-310 SUBSTN 152537.000 50X132 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,581	0	12,080	0	13,661		
	2024	1,630	0	12,442	0	14,072		

Land Fair Cash Val: 4,890 Building Fair Cash Val: 37,326 **Non-Farm Value: 42,216**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-303-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-303-002-00 202 HIGHLAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DAVIS TINA D

202 HIGHLAND AVE
PO BOX 1014
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$15,620 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 4,869 Building Fair Cash Val: 41,991 Non-Farm Value: 46,860

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount. Rows for Tax Year 2023 and 2024, both showing OWNER OCCUPD with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Row: 11/03/2016, \$20,571, 2016R04136, No.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-303-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-303-003-00 204 HIGHLAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KEARNEY KEITH K

Address to send notice if different than shown at left:

PO BOX 802
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,726** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-303-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 861.88	ESTIMATED			2024 Taxes: \$ 860.12
Legal Description KINCAID ALL LOT 8 & S12 LOT 9 BLK 48 B349 P149 152535.000 94-1233&1234 47X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,850	0	14,898	0	16,748		
	2024	1,823	0	14,903	0	16,726		

Land Fair Cash Val: 5,469 Building Fair Cash Val: 44,709 **Non-Farm Value: 50,178**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/1994	\$35,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-303-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-303-004-00 206 HIGHLAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MERANO LAUREN L

Address to send notice if different than shown at left:

PO BOX 1155
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$37,663** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-303-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,765.80	ESTIMATED			2024 Taxes: \$ 2,539.06
Legal Description KINCAID LOT 7 BLK 48 2003R09222 35X125' 152534.000 2003R09222 35X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,378	0	26,642	0	28,020		
	2024	1,360	0	36,303	0	37,663		

Land Fair Cash Val: 4,080 Building Fair Cash Val: 108,909 **Non-Farm Value: 112,989**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/2003	\$28,500		Yes
05/10/2013	\$17,000	2013R01983	Yes
03/23/2018	\$80,000	2018R00850	No
11/09/2020	\$90,750	2020R04447	Yes
02/14/2024	\$113,000	2024R00400	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-303-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-303-005-00 210 HIGHLAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARCOGLIESE FRANK J JR & SHIRLEY

Address to send notice if different than shown at left:

PO BOX 141
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,014** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-303-005-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 682.18	ESTIMATED			2024 Taxes: \$ 722.83
Legal Description KINCAID LTS 5 & 6 BLK 48 152532.000 2002-01029 70X125 12-10-E 88-5993 90-03217	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,756	0	5,751	0	8,507		
	2024	2,717	0	6,297	0	9,014		

Land Fair Cash Val: 8,151 Building Fair Cash Val: 18,891 **Non-Farm Value: 27,042**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-303-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-303-006-00 210 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRUDEAU ANDREA

Address to send notice if different than shown at left:

PO BOX 883
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,940** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-303-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 212.42	ESTIMATED			2024 Taxes: \$ 877.28
Legal Description KINCAID LTS 3 & 4 BLK 48 152531.000 2002-04817 70X111.5 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,608	0	3,133	0	5,741		
	2024	2,570	0	14,370	0	16,940		

Land Fair Cash Val: 7,710 Building Fair Cash Val: 43,110 **Non-Farm Value: 50,820**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	3092
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2002	\$29,500		Yes
07/20/2018	\$15,000	2018R02296	No
04/22/2019	\$14,000	2019R01187	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-303-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-303-007-00 214 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOSLEY JAMES G

Address to send notice if different than shown at left:

PO BOX 170
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,947** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-303-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,057.24		ESTIMATED	2024 Taxes: \$ 877.84
Legal Description KINCAID LTS 1 & 2 BLK 48 97-02012 152529.000 90-05076 152X89X178 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,013	0	8,171	0	13,184	
	2024	4,940	0	6,007	0	10,947	

Land Fair Cash Val: 14,820 Building Fair Cash Val: 18,021 **Non-Farm Value: 32,841**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-303-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-304-001-00 101 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTINO MARIO

Address to send notice if different than shown at left:

PO BOX 1052
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,547** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-304-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 131.52		ESTIMATED 2024 Taxes: \$ 284.43	
Legal Description KINCAID LT 18 & W1/2 19 BLK 51 MHRE 152606.000 2000-06428 58.9X125AV 12-10-E 95-5080	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,288	0	352	0	1,640	
	2024	2,287	0	1,260	0	3,547	

Land Fair Cash Val: 6,861 Building Fair Cash Val: 3,780 **Non-Farm Value: 10,641**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2000	\$9,000		Yes
03/06/2019	\$4,000	2019R00696	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-304-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-304-002-00 105 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SIDWELL JOSEPH A

105 CHESTNUT ST
PO BOX 234
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,093** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-304-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,303.74		ESTIMATED	2024 Taxes: \$ 1,210.31
Legal Description KINCAID E1/2 LT 19 & ALL LT 20 BLK 51 152607.000 2004R05857 52.5X125 12-10-E 2003R07839	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,068	0	20,190	0	22,258	
	2024	2,040	0	19,053	0	21,093	

Land Fair Cash Val: 6,120 Building Fair Cash Val: 57,159 **Non-Farm Value: 63,279**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2003	\$10,000		Yes
03/30/2005	\$60,000	2005R01764	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-304-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-304-003-00 107 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EVANS JOHN E

111 CHESTNUT ST
PO BOX 695
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,500** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-304-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 175.70	ESTIMATED			2024 Taxes: \$ 200.48
Legal Description KINCAID LT 21 & W1/2 LT 22 BLK 51 2003R04153 152609.000 52.5X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,068	0	123	0	2,191		
	2024	2,040	0	460	0	2,500		

Land Fair Cash Val: 6,120 Building Fair Cash Val: 1,380 **Non-Farm Value: 7,500**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-304-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-304-004-00 111 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EVANS JOHN E

Address to send notice if different than shown at left:

PO BOX 695
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,644** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-304-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,675.02		ESTIMATED		2024 Taxes: \$ 1,735.64
Legal Description KINCAID E1/2 LT 22 & ALL LTS 23 & 24 BLK 51 152611.000 94-2917 87.5X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,445	0	23,443	0	26,888		
	2024	3,397	0	24,247	0	27,644		

Land Fair Cash Val: 10,191 Building Fair Cash Val: 72,741 **Non-Farm Value: 82,932**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1994	\$50,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-304-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-304-005-00 115 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FOSTER SETH

Address to send notice if different than shown at left:

620 E ASH ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,560** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-304-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,827.62		ESTIMATED	2024 Taxes: \$ 1,728.90	
Legal Description KINCAID LT 25 & W1/2 LT 26 BLK 51 2004R05043 52.5X125 12-10-E 2002R08652 2001R00642 98-03219 152614.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,068	0	20,723	0	22,791		
	2024	2,040	0	19,520	0	21,560		

Land Fair Cash Val: 6,120 Building Fair Cash Val: 58,560 **Non-Farm Value: 64,680**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/2001	\$48,000		Yes
10/11/2007	\$61,000	2007R04956	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-304-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-304-006-00 121 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BARSTOW ANTHONY & SAMANTHA

Address to send notice if different than shown at left:

3784 KIDDS MILL RD
FRANKLINVILLE NC 27248

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,293** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-304-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,358.50		ESTIMATED 2024 Taxes: \$ 1,466.92	
Legal Description KINCAID E1/2 LT 26 & ALL LT 27 BLK 51 152616.000 2004R04636 52.5X125 12-10-E 99-06979 99-03442 CFD1997	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,068	0	14,873	0	16,941	
	2024	2,040	0	16,253	0	18,293	

Land Fair Cash Val: 6,120 Building Fair Cash Val: 48,759 **Non-Farm Value: 54,879**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2004	\$27,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-304-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-304-007-00 125 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HUGHES KIMBERLY K & RICHARD A FULTON

PO BOX 81 KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$7,530 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 6,120 Building Fair Cash Val: 16,470 Non-Farm Value: 22,590

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount. Rows for Tax Year 2023 (OWNER OCCUPD, 1962) and Tax Year 2024 (OWNER OCCUPD, 6000).

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Row: 07/22/2020, \$6,000, 2020R02680, Yes.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes handwritten initials Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-304-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-304-009-00 129 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARCOGLIESE NICHOLAS F
%FRANK J JR & SHIRLEY MARCOGLIESE

PO BOX 141
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,616** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-304-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,550.88		ESTIMATED	2024 Taxes: \$ 1,733.39	
Legal Description KINCAID E 1/2 LOT 29 & ALL LOTS 30 31 32 33 & 34 BLK 51 192.5X125' 152620.000 152620.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,583	0	17,757	0	25,340		
	2024	7,473	0	20,143	0	27,616		

Land Fair Cash Val: 22,419 Building Fair Cash Val: 60,429 **Non-Farm Value: 82,848**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-304-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-304-012-00 130 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURVEY BERNARD A & JANE E (LSR)
FOR CHRIS HUGHES (LSE)

PO BOX 677
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,337** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-304-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 500.64		ESTIMATED 2024 Taxes: \$ 588.36	
Legal Description KINCAID LTS 1 & 2 BLK 51 98-08190 152589.000 99-03073 70X125 12-10-E 79-25594	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,756	0	9,487	0	12,243	
	2024	2,717	0	10,620	0	13,337	

Land Fair Cash Val: 8,151 Building Fair Cash Val: 31,860 **Non-Farm Value: 40,011**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000
2024	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1979	\$17,900		Yes
12/13/2005	\$5,000	2005R06981	Yes
03/12/2009	\$12,000	2009R01422	No
08/05/2015	\$1,000	2015R03065	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-304-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-304-013-00 126 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JARVIS MARSHALL & RUTH

126 ELM ST
PO BOX 566
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,930** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-304-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,044.96		ESTIMATED	2024 Taxes: \$ 1,117.05	
Legal Description KINCAID LTS 3 4 & 5 BLK 51 2002-07137 105X125 12-10-E 2001-07318CFD 92-3894 96-00535 152592.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,138	0	16,893	0	21,031		
	2024	4,077	0	17,853	0	21,930		

Land Fair Cash Val: 12,231 Building Fair Cash Val: 53,559 **Non-Farm Value: 65,790**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled Person	6000 2000
2024	OWNER OCCUPD Disabled Person	6000 2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2002	\$30,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-304-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-304-014-00 118 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLEETON JR OVEY R

118 ELM ST
PO BOX 424
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,036** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-304-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,845.26	ESTIMATED			2024 Taxes: \$ 1,847.26
Legal Description KINCAID LOTS 6 7 8 9 & LOT 10 BLK 51 2006R00592 2001R07047 BK166 PG448 175X125' 152596.000 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,894	0	22,117	0	29,011		
	2024	6,793	0	22,243	0	29,036		

Land Fair Cash Val: 20,379 Building Fair Cash Val: 66,729 **Non-Farm Value: 87,108**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2001	\$40,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-304-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-304-015-00 112 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WILLIAMS PAMELA & NATALIE

110 ELM ST
PO BOX 973
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,370** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-304-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 427.90	ESTIMATED			2024 Taxes: \$ 671.19
Legal Description KINCAID LOT 11 BLK 51 2001R07283 1996R04283 1993R01518 35X125' 152600.000 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,378	0	3,958	0	5,336		
	2024	1,360	0	7,010	0	8,370		

Land Fair Cash Val: 4,080 Building Fair Cash Val: 21,030 **Non-Farm Value: 25,110**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1993	\$17,500		Yes
12/11/2015	\$7,000	2015R04799	Yes
03/03/2022	\$10,000	2022R00762	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-304-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-304-016-00 110 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WILLIAMS CARL E & PAMELA S

110 ELM ST
PO BOX 973
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,127** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-304-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 199.68	ESTIMATED			2024 Taxes: \$ 199.67
Legal Description KINCAID LOTS 12 & 13 BLK 51 152601.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
1999R05709 70X125 12-10-E	2023	2,756	0	17,014	0	19,770		
1989R10790 1977R13006	2024	2,717	0	18,410	0	21,127		
1999R05708								

Land Fair Cash Val: 8,151 Building Fair Cash Val: 55,230 **Non-Farm Value: 63,381**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	4280
	Disabled Person	2000
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	5637
	Disabled Person	2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-304-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-304-018-00 106 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NAVE GARY L

106 ELM ST
PO BOX 1045
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,257** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-304-018-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 40.10		ESTIMATED	2024 Taxes: \$ 40.10
Legal Description KINCAID LTS 14 & 15 BLK 51 95-1447 MHRE 152603.000 2000-06436 70X125 12-10-E 93-2283	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,756	0	33	0	2,789	
	2024	2,717	0	1,540	0	4,257	

Land Fair Cash Val: 8,151 Building Fair Cash Val: 4,620 **Non-Farm Value: 12,771**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	2289
<u>Tax Year</u> 2024 OWNER OCCUPD	3757

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-304-018-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-304-019-00 350 S MAIN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIGGASON JON M & DEBRA S

Address to send notice if different than shown at left:

PO BOX 824
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$45,183** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-304-019-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,530.16	ESTIMATED			2024 Taxes: \$ 3,142.09
Legal Description KINCAID LTS 16 & 17 BLK 51 152605.000 2004R04022 74.5X125AV 12-10-E 1982R41430	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,937	0	34,615	0	37,552		
	2024	2,893	0	42,290	0	45,183		

Land Fair Cash Val: 8,679 Building Fair Cash Val: 126,870 **Non-Farm Value: 135,549**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2004	\$3,500		Yes
03/09/2007	\$4,000	2007R01108	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-304-019-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-305-002-00 203 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BARTON MICHELLE

Address to send notice if different than shown at left:

PO BOX 1122
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,965** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-305-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 772.00	ESTIMATED			2024 Taxes: \$ 1,200.05
Legal Description KINCAID LOTS 25 26 & 27 BLK 47 152514.000 B328 P613 105X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,138	0	11,489	0	15,627		
	2024	4,077	0	16,888	0	20,965		

Land Fair Cash Val: 12,231 Building Fair Cash Val: 50,664 **Non-Farm Value: 62,895**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/20/2017	\$25,000	2017R01429	No
11/23/2022	\$62,900	2022R04240	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-305-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-305-003-00 213 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HEINZ STEPHEN A & DENISE C

Address to send notice if different than shown at left:

7016 FULTON RD
NEW BERLIN IL 62670

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,999** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-305-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,751.84		ESTIMATED 2024 Taxes: \$ 1,202.77	
Legal Description KINCAID ALL LOTS 28 29 & 30 & W5 LOT 31 BLK 47 152518.000 2004R06611 110X125 12-10-E 2002R02363	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,335	0	17,511	0	21,846	
	2024	4,270	0	10,729	0	14,999	

Land Fair Cash Val: 12,810 Building Fair Cash Val: 32,187 **Non-Farm Value: 44,997**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2004	\$35,000		Yes
02/01/2021	\$45,000	2021R00424	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-305-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-305-004-00 219 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NEIGHBOURS LYNDAL E

219 CHESTNUT ST
PO BOX 86
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$41,486** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-305-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,783.80		ESTIMATED	2024 Taxes: \$ 2,845.63
Legal Description KINCAID E30 LOT 31 & ALL LOTS 32 & 33 BLK 47 152519.000 2004R00778 100X125 12-10-E 89-8026 92-01674 95-2652	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,942	0	36,773	0	40,715	
	2024	3,883	0	37,603	0	41,486	

Land Fair Cash Val: 11,649 Building Fair Cash Val: 112,809 **Non-Farm Value: 124,458**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/2004	\$94,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-305-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-305-005-00 221 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COY MARGARET J

221 CHESTNUT ST
PO BOX 412
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,076** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-10-305-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 124.54	ESTIMATED			2024 Taxes: \$ 124.54
Legal Description KINCAID LTS 34 & 35 BLK 47 2004R01597 152523.000 B347 P185 70X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,801	0	14,775	0	16,576		
	2024	1,773	0	19,303	0	21,076		

Land Fair Cash Val: 5,319 Building Fair Cash Val: 57,909 **Non-Farm Value: 63,228**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled Person	2000
	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	2023
2024	Disabled Person	2000
	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	6023
	IMPROVEMENT	500

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/2004	\$16,000		Yes
05/08/2008	\$14,000	2008R02433	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-305-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-305-006-00 225 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DOWDY MICHAEL & HALEY

225 CHESTNUT ST
PO BOX
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$46,162** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-305-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,142.92	ESTIMATED			2024 Taxes: \$ 3,220.60
Legal Description KINCAID LTS 36 & 37 BLK 47 152525.000 2004R03152 70X125 12-10-E 2004R02827 99-06145 98-07768	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,756	0	29,967	0	32,723		
	2024	2,717	0	43,445	0	46,162		

Land Fair Cash Val: 8,151 Building Fair Cash Val: 130,335 **Non-Farm Value: 138,486**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2004	\$13,000		Yes
05/19/2005	\$59,000	2005R02879	Yes
07/26/2011	\$81,500	2011R03197	Yes
12/01/2014	\$90,000	2014R05008	Yes
04/12/2024	\$138,500	2024R01032	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-305-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-305-007-00 227 CHESTNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CRAVENS PHYLLIS G

227 CHESTNUT ST
PO BOX 14
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$39,080** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-305-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,189.46		ESTIMATED 2024 Taxes: \$ 1,189.46	
Legal Description KINCAID LOTS 38 & 39 BLK 47 2004R04589 2003R09079 2002R01029 1990R03226 1988R00477 1977R15928 76X64'AV & 70X105.6' 152526.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,663	0	31,838	0	36,501	
	2024	4,593	0	34,487	0	39,080	

Land Fair Cash Val: 13,779 Building Fair Cash Val: 103,461 **Non-Farm Value: 117,240**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	10668
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	13247

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2004	\$77,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-305-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-305-009-00 230 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KIRCHHOFF MITCHELL K

230 ELM ST
PO BOX 351
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,674** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: RESIDENTIAL BUILDING REMOVED.

Parcel Number 15-12-10-305-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,352.06	ESTIMATED			2024 Taxes: \$ 2,780.51
Legal Description KINCAID LTS 8 & 9 BLK 47 152498.000 85-7161 70X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,756	0	32,575	0	35,331		
	2024	2,717	0	37,957	0	40,674		

Land Fair Cash Val: 8,151 Building Fair Cash Val: 113,871 **Non-Farm Value: 122,022**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-305-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-305-010-00 228 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MELVIN RANDY

228 ELM ST
PO BOX 1076
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$51,823** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-305-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,300.64		ESTIMATED		2024 Taxes: \$ 3,674.56
Legal Description KINCAID LT 10 & E1/2 LT 11 BLK 47 152499.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
91-05727 52.5X125 12-10-E	2023	2,068	0	45,092	0	47,160		
	2024	2,040	0	49,783	0	51,823		

Land Fair Cash Val: 6,120 Building Fair Cash Val: 149,349 **Non-Farm Value: 155,469**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/30/2006	\$100,000	2006R04215	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-305-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-305-011-00 224 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIGGASON JON M & DEBRA S

Address to send notice if different than shown at left:

PO BOX 824
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,807** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-305-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 981.22	ESTIMATED			2024 Taxes: \$ 1,107.19
Legal Description KINCAID W1/2 LT 11 & ALL LT 12 BLK 47 92-0362 152501.000 67-182575 52.5X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,068	0	10,168	0	12,236		
	2024	2,040	0	11,767	0	13,807		

Land Fair Cash Val: 6,120 Building Fair Cash Val: 35,301 **Non-Farm Value: 41,421**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/08/2008	\$21,500	2008R04151	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-305-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-305-012-00 222 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIGGASON DEBRA

Address to send notice if different than shown at left:

PO BOX 824
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,863** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-305-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,461.56	ESTIMATED			2024 Taxes: \$ 1,432.44
Legal Description KINCAID LT 13 & E1/2 14 BLK 47 2004R05308 & 9 152502.000 52.5X125 12-10-E 85-10577	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,068	0	16,158	0	18,226		
	2024	2,040	0	15,823	0	17,863		

Land Fair Cash Val: 6,120 Building Fair Cash Val: 47,469 **Non-Farm Value: 53,589**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2004	\$46,500		Yes
05/05/2008	\$17,000	2008R02316	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-305-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-305-013-00 218 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SIMMONS LOREN K &
KIMBERLY J FAY
218 ELM ST
PO BOX 92
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,087** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-10-305-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 448.26	ESTIMATED			2024 Taxes: \$ 448.26
Legal Description KINCAID W1/2 LT 14 & ALL LTS 15 16 & 17 BLK 47 2003R08849 152503.000 119.5X125 12-10-E 2002R01029	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,709	0	15,706	0	20,415		
	2024	4,640	0	17,447	0	22,087		

Land Fair Cash Val: 13,920 Building Fair Cash Val: 52,341 **Non-Farm Value: 66,261**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY SEN FREEZE	5000 3825
2024	ELDERLY SEN FREEZE	5000 5497

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2003	\$49,900		Yes
04/27/2005	\$59,900	2005R02413	Yes
10/30/2009	\$19,200	2009R06072	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-305-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-305-014-00 212 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILLER TREVOR & CRYSTAL

PO BOX 711
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,647** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-305-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,558.10	ESTIMATED			2024 Taxes: \$ 1,575.50
Legal Description KINCAID LTS 18 & 19 BLK 47 92-5494 152506.000 95-05868 70X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,756	0	22,674	0	25,430		
	2024	2,717	0	22,930	0	25,647		

Land Fair Cash Val: 8,151 Building Fair Cash Val: 68,790 **Non-Farm Value: 76,941**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1995	\$32,000		Yes
06/24/2011	\$36,000	2011R02755	No
04/03/2017	\$62,000	2017R01185	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-305-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-305-015-00 208 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HALE ANGELA

Address to send notice if different than shown at left:

PO BOX 811
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$24,587 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 8,151 Building Fair Cash Val: 65,610 Non-Farm Value: 73,761

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-305-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-305-016-00 204 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CRAIG ORVILLE
% BERNARD A CURVEY
204 ELM ST
PO BOX 146
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,043** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-305-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID LT 22 BLK 47 2003R02489 152510.000 88-2732 35X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,378	0	10,094	0	11,472		
	2024	1,360	0	7,683	0	9,043		

Land Fair Cash Val: 4,080 Building Fair Cash Val: 23,049 **Non-Farm Value: 27,129**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled 70-100% Ve	6000 5472
2024	OWNER OCCUPD Disabled 70-100% Ve	6000 3043

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-305-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-305-017-00 350 HIGHLAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURVEY BERNARD A & JANE E (LSR)
FOR RICHARD TAYLOR (LSE)

PO BOX 677
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,660** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-305-017-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 985.38		ESTIMATED 2024 Taxes: \$ 453.88	
Legal Description KINCAID LTS 23 & 24 BLK 47 152511.000 70X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,756	0	9,532	0	12,288	
	2024	2,717	0	8,943	0	11,660	

Land Fair Cash Val: 8,151 Building Fair Cash Val: 26,829 **Non-Farm Value: 34,980**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2024 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/20/2011	\$30,000	2011R02234	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-305-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-001-00 300 MAIN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LUCAS ANITA R

Address to send notice if different than shown at left:

PO BOX 762
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,893** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-306-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 317.56	ESTIMATED			2024 Taxes: \$ 317.55
Legal Description KINCAID LT 16 BLK 52 152639.000 42X125AV 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,653	0	16,773	0	18,426		
	2024	1,630	0	20,263	0	21,893		

Land Fair Cash Val: 4,890 Building Fair Cash Val: 60,789 **Non-Farm Value: 65,679**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	3466
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	6933

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-002-00 105 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIGGASON JON M

300 S MAIN ST
PO BOX 824
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,107** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-306-002-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 252.60	ESTIMATED			2024 Taxes: \$ 249.15
Legal Description KINCAID LTS 17 & 18 BLK 52 152641.000 86-15673 80X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	0	0	3,150		
	2024	3,107	0	0	0	3,107		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 0 **Non-Farm Value: 9,321**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/30/2012	\$16,000	2012R02322	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-003-00 107 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIGGASON JON M

300 S MAIN ST
PO BOX 824
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,107** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-306-003-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 252.60		ESTIMATED 2024 Taxes: \$ 249.15	
Legal Description KINCAID LTS 19 & 20 BLK 52 86-13686 MHRE 152642.000 96-02595 80X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,150	0	0	0	3,150	
	2024	3,107	0	0	0	3,107	

Land Fair Cash Val: 9,321 Building Fair Cash Val: 0 **Non-Farm Value: 9,321**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/30/2012	\$16,000	2012R02322	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-004-00 113 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GRIFFIN WILBERT H JR & TAMI L

Address to send notice if different than shown at left:

PO BOX 963
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,660** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-306-004-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 379.22		ESTIMATED		2024 Taxes: \$ 373.69
Legal Description KINCAID LOTS 21 22 23 BLK 52 1999R03945 1989R11687 120X125' 152644.000 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,729	0	0	0	4,729		
	2024	4,660	0	0	0	4,660		

Land Fair Cash Val: 13,980 Building Fair Cash Val: 0 **Non-Farm Value: 13,980**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
06/21/2011	\$6,000	2011R02682	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-005-00 117 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GRIFFIN WILBERT H JR

Address to send notice if different than shown at left:

PO BOX 963
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,553** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-306-005-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 126.30	ESTIMATED			2024 Taxes: \$ 124.54
Legal Description KINCAID LT 24 BLK 52 152647.000 91-01909 40X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	0	0	1,575		
	2024	1,553	0	0	0	1,553		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 0 **Non-Farm Value: 4,659**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-006-00 119 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GRIFFIN WILBERT H JR

Address to send notice if different than shown at left:

PO BOX 963
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,644** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-306-006-00	Class 0540	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 473.44	ESTIMATED			2024 Taxes: \$ 1,414.88
Legal Description KINCAID LTS 25 & 26 BLK 52 152649.000 86-16982 80X125 12-10-E MINE SUBSIDENCE	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	16,781	0	19,931		
	2024	3,107	0	20,537	0	23,644		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 61,611 **Non-Farm Value: 70,932**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 8027
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-007-00 123 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HP RENTALS LLC

Address to send notice if different than shown at left:

PO BOX 286
AUBURN

IL 62615

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,103** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-306-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,167.42		ESTIMATED		2024 Taxes: \$ 1,451.68
Legal Description KINCAID LT 27 BLK 52 2003R03079 152650.000 2002-06573 40X125 12-10-E 2001-04268 92-03735	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	12,983	0	14,558		
	2024	1,553	0	16,550	0	18,103		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 49,650 **Non-Farm Value: 54,309**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2003	\$44,000		Yes
09/11/2012	\$15,000	2012R05054	No
01/23/2015	\$13,000	2015R00255	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-008-00 125 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRINKLEY RHONDA J

Address to send notice if different than shown at left:

PO BOX 563
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,940** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-306-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 40.10		ESTIMATED	2024 Taxes: \$ 40.10	
Legal Description KINCAID LT 28 BLK 52 97-03352 152651.000 97-07243 40X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,338	0	1,993	0	3,331		
	2024	1,553	0	3,387	0	4,940		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 10,161 **Non-Farm Value: 14,820**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	2831
<u>Tax Year</u> 2024 OWNER OCCUPD	4440

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1984	\$10,000		Yes
12/08/2017	\$4,000	2017R04376	No
08/12/2020	\$5,000	2020R03016	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-009-00 129 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOTLEY MICHAEL

Address to send notice if different than shown at left:

630 W POPLAR ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,466** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-306-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 317.88		ESTIMATED 2024 Taxes: \$ 358.13	
Legal Description KINCAID N61.57' OF LOTS 29 & 30 BLK 52 74.98X61.57 2002-03200 ST DOC# 84-11-30	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	686	0	3,278	0	3,964	
	2024	1,213	0	3,253	0	4,466	

Land Fair Cash Val: 3,639 Building Fair Cash Val: 9,759 **Non-Farm Value: 13,398**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2002	\$10,000		Yes
08/28/2012	\$4,000	2012R04818	No
12/03/2019	\$6,000	2019R04207	No
07/13/2020	\$10,000	2020R02523	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-009-01 400 HIGHLAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOTLEY MICHAEL

Address to send notice if different than shown at left:

630 W POPLAR ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,023** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-306-009-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 490.36	ESTIMATED			2024 Taxes: \$ 482.99
Legal Description KINCAID S63.54' OF LOTS 29 & 30 BLK 52 152652.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
2002-03200 74.97X63.54 12-10-E	2023	1,271	0	4,844	0	6,115		
	2024	1,250	0	4,773	0	6,023		

Land Fair Cash Val: 3,750 Building Fair Cash Val: 14,319 **Non-Farm Value: 18,069**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/03/2019	\$6,000	2019R04207	No
07/21/2021	\$15,000	2021R03051	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-009-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-010-00 126 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH MARK L

126 WALNUT ST
PO BOX 544
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,236** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-306-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 353.88	ESTIMATED			2024 Taxes: \$ 353.88
Legal Description KINCAID LTS 1 & 2 BLK 52 152624.000 2004R03153 75X125 12-10-E 2000R07345 CFD 94 94-4920	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,953	0	18,475	0	21,428		
	2024	2,913	0	20,323	0	23,236		

Land Fair Cash Val: 8,739 Building Fair Cash Val: 60,969 **Non-Farm Value: 69,708**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
	SEN FREEZE	4015
2024	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
	SEN FREEZE	5823

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2004	\$49,900		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-011-00 120 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAVIS WILLIAM T & SHIRLEY F

120 WALNUT ST
PO BOX 541
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,374** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-306-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 379.30	ESTIMATED			2024 Taxes: \$ 1,045.36
Legal Description KINCAID LOTS 5 & 6 BLK 52 97-01481 152626.000 90-03230 80X125 12-10-E MINE SUB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	26,171	0	29,321		
	2024	3,107	0	28,267	0	31,374		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 84,801 **Non-Farm Value: 94,122**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	SEN FREEZE	5285
	OWNER OCCUPD	6000
	IMPROVEMENT	8306
2024	ELDERLY	5000
	SEN FREEZE	7338
	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-011-01 124 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HUNSLEY CARL R & KAYLA L

PO BOX 1163
124 WALNUT ST
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,997** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-306-011-01	Class 0540	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,315.28	ESTIMATED			2024 Taxes: \$ 2,164.89
Legal Description KINCAID LOTS 3 & 4 BLK 52 2000-07024 98-03312 97-03142-A 80X125 12-10-E CFD 2016 MINE SUBSIDENCE	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	29,029	0	32,179		
	2024	3,107	0	29,890	0	32,997		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 89,670 **Non-Farm Value: 98,991**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 9777
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/2000	\$80,500		Yes
09/18/2009	\$40,000	200905380	No
02/26/2016	\$43,000	2016R00706	No
11/01/2017	\$59,000	2017R03938	No
11/29/2021	\$99,000	2021R05031	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-011-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-012-00 116 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERROYER L SHAWN & MICHELLE D

Address to send notice if different than shown at left:

PO BOX 52
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$46,610** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-306-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,222.52	ESTIMATED			2024 Taxes: \$ 3,207.37
Legal Description KINCAID LOTS 7 & 8 BLK 52 1990R05381 80X125' 152630.000 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	43,649	0	46,799		
	2024	3,107	0	43,503	0	46,610		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 130,509 **Non-Farm Value: 139,830**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 613
2024	OWNER OCCUPD IMPROVEMENT	6000 613

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/17/2012	\$8,000	2012R00877	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-012-01 110 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MICHEL ROBERT L & SHARON A (LSR)
FOR DEIONA ANDREWS (LSE)

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,787** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-306-012-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 773.36	ESTIMATED			2024 Taxes: \$ 945.20
Legal Description KINCAID LOTS 9 & 10 BLK 52 80X125' 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	12,494	0	15,644		
	2024	3,107	0	14,680	0	17,787		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 44,040 **Non-Farm Value: 53,361**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000
<u>Tax Year</u> 2024 Leasehold Owner	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/23/2010	\$37,000	2010R01750	No
01/30/2017	\$135,000	2017R00370	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-012-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-014-00 104 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NELSON KERRY P & BRENDA M

104 WALNUT ST
PO BOX 31
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$64,243** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-306-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 4,073.18		ESTIMATED	2024 Taxes: \$ 4,670.52
Legal Description KINCAID LOTS 11 12 & 13 BLK 52 152636.000 2004R06832 120X125 12-10-E 94-05311 96-01517 96-00182 72-4851 83-48003	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,729	0	52,065	0	56,794	
	2024	4,660	0	59,583	0	64,243	

Land Fair Cash Val: 13,980 Building Fair Cash Val: 178,749 **Non-Farm Value: 192,729**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2004	\$145,000		Yes
04/14/2015	\$140,000	2015R01403	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-306-015-00 100 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BECK DANIEL A

Address to send notice if different than shown at left:

PO BOX 74
LITCHFIELD

IL 62056

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,324** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-306-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 659.24	ESTIMATED			2024 Taxes: \$ 667.50
Legal Description KINCAID LTS 14 & 15 BLK 52 2000-02602 152638.000 94-05951 80X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	5,071	0	8,221		
	2024	3,107	0	5,217	0	8,324		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 15,651 **Non-Farm Value: 24,972**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2000	\$39,900		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-306-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-307-001-00 201 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WILLIAMS JESSICA

Address to send notice if different than shown at left:

201 ELM ST
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,757** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-307-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 45.32		ESTIMATED	2024 Taxes: \$ 45.31	
Legal Description KINCAID LOTS 16 & 17 BLK 46 MHRE 152477.000 97-04241 80X125 12-10-E 89-11586	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,068	0	591	0	3,659		
	2024	3,107	0	1,650	0	4,757		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 4,950 **Non-Farm Value: 14,271**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	3094
2024	OWNER OCCUPD	4192

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/1997	\$20,500		Yes
12/09/2005	\$23,500	2005R06920	No
04/18/2007	\$17,500	2007R01871	Yes
01/06/2016	\$2,500	2016R00052	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-307-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-307-002-00 205 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HAFLIGER MICHAEL D

Address to send notice if different than shown at left:

PO BOX 558
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,930** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: A REVALUATION OF PROPERTY.

Parcel Number 15-12-10-307-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 304.40	ESTIMATED			2024 Taxes: \$ 315.15
Legal Description KINCAID LOT 18 BLK 46 152479.000 93-05727 40X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	2,221	0	3,796		
	2024	1,553	0	2,377	0	3,930		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 7,131 **Non-Farm Value: 11,790**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/15/2022	\$10,000	2022R02635	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-307-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-307-003-00 207 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HAFLIGER MICHAEL B

Address to send notice if different than shown at left:

PO BOX 558
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,553** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-307-003-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 126.30		ESTIMATED		2024 Taxes: \$ 124.54
Legal Description KINCAID LT 19 BLK 46 2003R06074 152480.000 96-07154 40X125 12-10-E 96-07153 79-27556	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	0	0	1,575		
	2024	1,553	0	0	0	1,553		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 0 **Non-Farm Value: 4,659**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/21/2017	\$8,000	2017R02242	Yes
12/01/2020	\$1,500	2020R04776	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-307-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-307-005-00 211 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HAFLIGER MICHAEL D

211 E ELM ST
PO BOX 558
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$65,580** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: IMPROVEMENT ADDED, MAY QUALIFY FOR AN IMPROVEMENT EXEMPTION. CHECK WITH BOARD OF REVIEW.

Parcel Number 15-12-10-307-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,241.72	ESTIMATED			2024 Taxes: \$ 2,772.98
Legal Description KINCAID LOTS 20 21 22 23 BLK 46 152482.000 2003R04452 160X125 12-10-E 2003R04451 TAX DEED 1999R05562 1999R02585	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,304	0	33,171	0	39,475		
	2024	6,213	0	59,367	0	65,580		

Land Fair Cash Val: 18,639 Building Fair Cash Val: 178,101 **Non-Farm Value: 196,740**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 5520
2024	OWNER OCCUPD IMPROVEMENT IMPROVEMENT	6000 5520 19480

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-307-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-307-008-00 217 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

PHILLIPS KIRA M & CHRISTOPHER DL
% STEVE E WICKS

677 E 1975 NORTH RD
EDINBURG IL 62531

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$16,636 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 4,659 Building Fair Cash Val: 45,249 Non-Farm Value: 49,908

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount. Rows for Tax Year 2023 and 2024, both showing OWNER OCCUPD with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes handwritten initials Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-307-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-307-009-00 219 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WICKS STEVEN

677 E 1975 NORTH RD
EDINBURG IL 62531

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,553** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-307-009-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 126.30		ESTIMATED		2024 Taxes: \$ 124.54
Legal Description KINCAID LT 25 BLK 46 152486.000 2004R05578 40X125 12-10-E 2002R01029 90-03216	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	0	0	1,575		
	2024	1,553	0	0	0	1,553		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 0 **Non-Farm Value: 4,659**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-307-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-307-010-00 223 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

REESE KAYLEE A

P O BOX 261
223 ELM ST
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,783** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-307-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,920.00		ESTIMATED		2024 Taxes: \$ 1,746.78
Legal Description KINCAID LOTS 26 27 & 28 BLK 46 152488.000 2004R01267 120X125 12-10-E 1996R06366 BK209 PG268	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,729	0	25,214	0	29,943		
	2024	4,660	0	23,123	0	27,783		

Land Fair Cash Val: 13,980 Building Fair Cash Val: 69,369 **Non-Farm Value: 83,349**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/15/2011	\$76,000	2011R05893	Yes
02/22/2017	\$73,000	2017R00696	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-307-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-307-011-00 227 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WILLIAMS REBA

Address to send notice if different than shown at left:

PO BOX 193
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,166** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-307-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 40.10		ESTIMATED		2024 Taxes: \$ 40.10
Legal Description KINCAID LOTS 29 & 30 BLK 46 1997R00049 75X125' 152490.000 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,928	0	1,317	0	3,245		
	2024	2,913	0	2,253	0	5,166		

Land Fair Cash Val: 8,739 Building Fair Cash Val: 6,759 **Non-Farm Value: 15,498**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-307-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-307-013-00 224 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CORSO TIMOTHY & MELISSA J

224 WALNUT ST
PO BOX 955
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$42,287** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-307-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,350.62		ESTIMATED		2024 Taxes: \$ 2,749.48
Legal Description KINCAID LOTS 1 2 3 4 5 & 6 BLK 46 1997R06232 235X125 152464.000 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	10,407	0	27,962	0	38,369		
	2024	11,387	0	30,900	0	42,287		

Land Fair Cash Val: 34,161 Building Fair Cash Val: 92,700 **Non-Farm Value: 126,861**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	IMPROVEMENT	1056
2024	OWNER OCCUPD	6000
	Disabled Person	2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/19/2007	\$77,900	2007R01259	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-307-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-307-015-00 216 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MATHON LISA M

Address to send notice if different than shown at left:

2823 E PARK ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,460** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-307-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 695.42		ESTIMATED 2024 Taxes: \$ 1,159.55	
Legal Description KINCAID LOT 7 BLK 46 2004R04805 152468.000 B215 P379 40X125 12-10-E 2000R06130 2004R03105	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,575	0	13,097	0	14,672	
	2024	1,553	0	12,907	0	14,460	

Land Fair Cash Val: 4,659 Building Fair Cash Val: 38,721 **Non-Farm Value: 43,380**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2004	\$23,000		Yes
05/02/2008	\$36,000	2008R02314	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-307-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-307-017-00 210 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NELSON TIMOTHY G

210 S WALNUT ST
PO BOX 852
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,050** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-307-017-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID LOTS 9 10 11 & 12 BLK 46 2003R04557 160X125' 152470.000 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,304	0	21,256	0	27,560		
	2024	6,213	0	20,837	0	27,050		

Land Fair Cash Val: 18,639 Building Fair Cash Val: 62,511 **Non-Farm Value: 81,150**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled 70-100% Ve	21560
2024	Disabled 70-100% Ve	21050

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2003	\$55,000		Yes
07/20/2016	\$69,900	2016R02591	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-307-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-307-017-01 214 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DANIELS JAMES C & LISA M

75 MILLER LN
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,223** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-307-017-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 626.30	ESTIMATED			2024 Taxes: \$ 579.21
Legal Description KINCAID LOT 8 BLK 46 40X125' 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	6,235	0	7,810		
	2024	1,553	0	5,670	0	7,223		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 17,010 **Non-Farm Value: 21,669**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-307-017-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-307-019-00 200 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PARRISH JESSICA

Address to send notice if different than shown at left:

PO BOX 1094
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,703** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-307-019-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,145.26		ESTIMATED	2024 Taxes: \$ 2,315.33	
Legal Description KINCAID LOTS 13 14 & 15 BLK 46 152476.000 1996R05716 120X125 12-10-E 1994R03973 1991R03897	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,729	0	28,023	0	32,752		
	2024	4,660	0	31,043	0	35,703		

Land Fair Cash Val: 13,980 Building Fair Cash Val: 93,129 **Non-Farm Value: 107,109**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD IMPROVEMENT	6000 830

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-307-019-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-308-001-00 201 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

GLEASON CHRISTOPHER M & YOLANDA

201 WALNUT ST
PO BOX 738
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$29,826 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 13,389 Building Fair Cash Val: 76,089 Non-Farm Value: 89,478

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows 2023 and 2024 exemptions for OWNER OCCUPD at 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows a sale on 08/01/2000 for \$65,000, qualified.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-308-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-308-002-00 207 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SEXSON MICHAEL

207 WALNUT ST
PO BOX 51
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,457** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-308-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,042.32		ESTIMATED		2024 Taxes: \$ 1,042.31
Legal Description KINCAID LOT 19 & W1/2 LOT 20 BLK 57 1996R03327 60X125' 152773.000 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,362	0	30,251	0	32,613		
	2024	2,330	0	30,127	0	32,457		

Land Fair Cash Val: 6,990 Building Fair Cash Val: 90,381 **Non-Farm Value: 97,371**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled Person	2000
	ELDERLY	5000
	SEN FREEZE	6615
2024	Disabled Person	2000
	ELDERLY	5000
	SEN FREEZE	6459

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/11/2008	\$5,000	2008R01204	Yes
08/18/2009	\$65,000	2009R04851	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-308-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-308-003-00 211 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HUFFMAN MATTHEW L

Address to send notice if different than shown at left:

5 WOODLAND TRL
ROCHESTER IL 62563

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,130** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-308-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,525.84		ESTIMATED		2024 Taxes: \$ 2,496.32
Legal Description KINCAID E1/2 LOT 20 & ALL LOT 21 BLK 57 1994R00310 60X125' 152774.000 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,362	0	29,136	0	31,498		
	2024	2,330	0	28,800	0	31,130		

Land Fair Cash Val: 6,990 Building Fair Cash Val: 86,400 **Non-Farm Value: 93,390**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/11/2008	\$11,685	2008R01205	No
06/02/2011	\$92,150	2011R02396	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-308-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-308-004-00 213 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KELLEY TABITHA

Address to send notice if different than shown at left:

PO BOX 431
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,153** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-308-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,255.22		ESTIMATED		2024 Taxes: \$ 1,215.12
Legal Description KINCAID LOT 22 BLK 57 2001R03091 40X125' 152776.000 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	20,078	0	21,653		
	2024	1,553	0	19,600	0	21,153		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 58,800 **Non-Farm Value: 63,459**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/30/2012	\$52,900	2012R02325	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-308-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-308-005-00 217 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ANDERSON PATRICIA J
% MARCIA AUSTIN

5636 CORSICA LOOP
ROUND ROCK TX 78665

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,823** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-308-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 713.70		ESTIMATED 2024 Taxes: \$ 713.69	
Legal Description KINCAID LOTS 23 24 25 & 26 BLK 57 152778.000 160X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	6,304	0	28,109	0	34,413	
	2024	6,213	0	29,610	0	35,823	

Land Fair Cash Val: 18,639 Building Fair Cash Val: 88,830 **Non-Farm Value: 107,469**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	14513
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	15923

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-308-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-308-007-00 225 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BURCHI JACKIE L

225 WALNUT ST
PO BOX 603
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,660** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-308-007-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 379.22		ESTIMATED		2024 Taxes: \$ 373.69
Legal Description KINCAID LTS 27 28 & 29 BLK 57 152781.000 2004R00012 120X125 12-10-E BK292 PG422	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,729	0	0	0	4,729		
	2024	4,660	0	0	0	4,660		

Land Fair Cash Val: 13,980 Building Fair Cash Val: 0 **Non-Farm Value: 13,980**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-308-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-308-008-00 229 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

LANDHOLT KODI J

Address to send notice if different than shown at left:

229 WALNUT ST
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$25,798 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 4,659 Building Fair Cash Val: 72,735 Non-Farm Value: 77,394

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes red arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes sales from 2013 to 2024.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-308-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-308-009-00 226 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROOKS TAMARA C

Address to send notice if different than shown at left:

PO BOX 594
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,676** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-308-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,473.98	ESTIMATED			2024 Taxes: \$ 1,561.54
Legal Description KINCAID LTS 1 2 3 & 4 BLK 57 152756.000 87-23914 160X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,304	0	18,280	0	24,584		
	2024	6,213	0	19,463	0	25,676		

Land Fair Cash Val: 18,639 Building Fair Cash Val: 58,389 **Non-Farm Value: 77,028**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 203
2024	OWNER OCCUPD IMPROVEMENT	6000 203

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1987	\$27,000		Yes
09/02/2008	\$57,500	2008R04548	Yes
07/18/2016	\$59,900	2016R02521	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-308-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-308-010-00 218 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

YOUNG JEFFREY

Address to send notice if different than shown at left:

2000 CLAREMONT DR
SPRINGFIELD IL 62703

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$6,753 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 7,599 Building Fair Cash Val: 12,660 Non-Farm Value: 20,259

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes entries for 12/30/2020 and 04/15/2024.

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-308-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-308-011-00 214 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOOMEY DONALD W & BRIDGET L

Address to send notice if different than shown at left:

PO BOX 225
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,230** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-308-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 888.12	ESTIMATED			2024 Taxes: \$ 1,141.11
Legal Description KINCAID W1/2 LOT 7 & ALL LOT 8 BLK 57 60X125' 152761.000 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,362	0	8,713	0	11,075		
	2024	2,330	0	11,900	0	14,230		

Land Fair Cash Val: 6,990 Building Fair Cash Val: 35,700 **Non-Farm Value: 42,690**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/24/2021	\$27,000	2021R00724	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-308-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-308-012-00 210 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KOEHNE JAMES R JR

210 HICKORY ST
PO BOX 471
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,923** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-308-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,968.36	ESTIMATED			2024 Taxes: \$ 2,158.96
Legal Description KINCAID LOTS 9 10 11 & 12 BLK 57 152764.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
1998R03779 160X125 12-10-E	2023	6,304	0	24,242	0	30,546		
1989R08385 1987R21287	2024	6,213	0	26,710	0	32,923		

Land Fair Cash Val: 18,639 Building Fair Cash Val: 80,130 **Non-Farm Value: 98,769**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1998	\$63,600		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-308-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-308-014-00 500 HIGHLAND AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DIAL LAUREN E

500 HIGHLAND AVE
PO BOX 282
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$44,116** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-308-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,016.76		ESTIMATED	2024 Taxes: \$ 3,056.53	
Legal Description KINCAID W1/2 LOT 14 & ALL LOT 15 BLK 57 2005R06461 54.94X125' 152767.000 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,166	0	41,454	0	43,620		
	2024	2,133	0	41,983	0	44,116		

Land Fair Cash Val: 6,399 Building Fair Cash Val: 125,949 **Non-Farm Value: 132,348**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/20/2004	\$6,000	2004R07901	No
01/24/2007	\$15,000	2007R00389	Yes
05/27/2008	\$86,500	2008R02795	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-308-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-308-014-01 200 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

REED RICHARD W JR

P O BOX 754
200 HICKORY ST
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$36,867** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-308-014-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,575.64		ESTIMATED	2024 Taxes: \$ 2,475.23
Legal Description KINCAID LOT 13 & E1/2 LOT 14 BLOCK 57 2008R00398 60X125' 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,362	0	35,757	0	38,119	
	2024	2,330	0	34,537	0	36,867	

Land Fair Cash Val: 6,990 Building Fair Cash Val: 103,611 **Non-Farm Value: 110,601**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/24/2008	\$86,000	2008R00398	Yes
08/10/2012	\$90,600	2012R04513	Yes
05/22/2017	\$92,000	2017R01864	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-308-014-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-309-002-00 205 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BEHREND'S BRADLEY D & KAYLA C

Address to send notice if different than shown at left:

205 HICKORY ST
KINCAID IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,670** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-309-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,400.32		ESTIMATED		2024 Taxes: \$ 3,660.44
Legal Description KINCAID LOTS 16, 17, 18 & 19 BLK 58 1997R04943 154.95X125' 152802.000 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,103	0	43,323	0	49,426		
	2024	6,017	0	46,653	0	52,670		

Land Fair Cash Val: 18,051 Building Fair Cash Val: 139,959 **Non-Farm Value: 158,010**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	1023
2024	IMPROVEMENT	1023

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/19/2005	\$109,500	2005R07089	Yes
05/18/2018	\$118,000	2018R01576	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-309-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-309-003-00 209 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEIKLE KEVIN L

Address to send notice if different than shown at left:

PO BOX 574
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,523** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-309-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,276.88		ESTIMATED		2024 Taxes: \$ 1,405.17
Legal Description KINCAID LOTS 20 21 & 22 BLK 58 93-06180 152804.000 79-28021 120X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,729	0	17,194	0	21,923		
	2024	4,660	0	18,863	0	23,523		

Land Fair Cash Val: 13,980 Building Fair Cash Val: 56,589 **Non-Farm Value: 70,569**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1979	\$26,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-309-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-309-005-00 215 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

GREGORY MARC & MELANIE

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$10,010 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for Year, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 9,321 Building Fair Cash Val: 20,709 Non-Farm Value: 30,030

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Lists exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows sales history for 2010 and 2024.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes handwritten initials Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-309-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-309-006-00 221 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURVEY BERNARD A & JANE E (LSR)
FOR TERRY & JANIS DRAUGHAN (LSE)

PO BOX 677
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,250** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-309-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 799.66		ESTIMATED 2024 Taxes: \$ 1,062.52	
Legal Description KINCAID LTS 25 26 & 27 BLK 58 152810.000 2001R06900 120X125 12-10-E 1973R06661 2000R03885	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,729	0	11,243	0	15,972	
	2024	4,660	0	14,590	0	19,250	

Land Fair Cash Val: 13,980 Building Fair Cash Val: 43,770 **Non-Farm Value: 57,750**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000
2024	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/29/2012	\$25,750	2012R06546	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-309-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-309-008-00 225 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KEAFER RICHARD JR (LSE)
 % RICHARD E SR & LORI A KEAFER (LSR)

 PO BOX 334
 KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,457** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-309-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 40.10		ESTIMATED		2024 Taxes: \$ 40.10
Legal Description KINCAID LOTS 28 & 29 BLK 58 MHRE 2005R03551 1990R03703 80X125' 152812.000 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	1,727	0	4,877		
	2024	3,107	0	2,350	0	5,457		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 7,050 **Non-Farm Value: 16,371**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	4377
<u>Tax Year</u> 2024 Leasehold Owner	4957

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/30/2005	\$11,000	2005R03748	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-309-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-309-009-00 229 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KEAFER RICHARD E

Address to send notice if different than shown at left:

PO BOX 334
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,553** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-309-009-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 126.30		ESTIMATED		2024 Taxes: \$ 124.54
Legal Description KINCAID LT 30 BLK 58 152814.000 92-1192 40X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	0	0	1,575		
	2024	1,553	0	0	0	1,553		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 0 **Non-Farm Value: 4,659**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
10/01/1988	\$2,000		Yes
06/26/2014	\$2,300	2014R02370	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-309-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-309-010-00 228 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WILLETT DAVE & MILDRED
%MELISSA CAPPELLIN

PO BOX 662
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,064** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-309-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID LTS 1 & 2 BLK 58 MHRE 152785.000 89-6635 80X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	3,474	0	6,624		
	2024	3,107	0	5,957	0	9,064		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 17,871 **Non-Farm Value: 27,192**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD ELDERLY	6000 3064

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-309-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-309-011-00 222 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VEACH GERALD F

Address to send notice if different than shown at left:

PO BOX 853
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$51,810** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-309-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,207.22	ESTIMATED			2024 Taxes: \$ 3,272.56
Legal Description KINCAID LOTS 3 4 5 6 7 & 8 BLK 58 152787.000 1989R08508 240X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,455	0	41,540	0	50,995		
	2024	9,317	0	42,493	0	51,810		

Land Fair Cash Val: 27,951 Building Fair Cash Val: 127,479 **Non-Farm Value: 155,430**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-309-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-309-013-00 210 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SPURGEON KAREN A

Address to send notice if different than shown at left:

PO BOX 734
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,443** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-309-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,277.54		ESTIMATED		2024 Taxes: \$ 3,323.32
Legal Description KINCAID LOTS 9 10 11 & 12 BLK 58 152794.000 2004R01482 160X125 12-10-E CFD 11-6-98 98-01099	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,304	0	45,568	0	51,872		
	2024	6,213	0	46,230	0	52,443		

Land Fair Cash Val: 18,639 Building Fair Cash Val: 138,690 **Non-Farm Value: 157,329**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/20/2007	\$10,000	2007R04578	No
07/20/2015	\$20,000	2015R02818	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-309-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-309-015-00 202 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HAY DOLORES

Address to send notice if different than shown at left:

PO BOX 1001
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,880** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-309-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 579.78	ESTIMATED			2024 Taxes: \$ 579.78
Legal Description KINCAID LTS 13 14 15 BLK 58 152797.000 115X125 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,533	0	28,784	0	33,317		
	2024	4,463	0	26,417	0	30,880		

Land Fair Cash Val: 13,389 Building Fair Cash Val: 79,251 **Non-Farm Value: 92,640**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	15087
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	12650

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-309-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-310-001-00 114 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SEDLOCK JOHN & KATHY

114 COMMONWEALTH AVE
PO BOX 444
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,264** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-310-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 783.46	ESTIMATED			2024 Taxes: \$ 783.46
Legal Description KINCAID LT 18 BLK 9 151958.000 78-23400 50X163.90 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,247	0	25,772	0	28,019		
	2024	2,217	0	31,047	0	33,264		

Land Fair Cash Val: 6,651 Building Fair Cash Val: 93,141 **Non-Farm Value: 99,792**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
	SEN FREEZE	5249
2024	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
	SEN FREEZE	10494

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1978	\$26,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-310-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-310-002-00 112 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BELL BYRON E & LINDA

112 COMMONWEALTH AVE
PO BOX 331
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,294** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-310-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 972.72	ESTIMATED			2024 Taxes: \$ 972.71
Legal Description KINCAID LT 17 BLK 9 151957.000 88-3072 50X163.90 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,247	0	27,241	0	29,488		
	2024	2,217	0	28,077	0	30,294		

Land Fair Cash Val: 6,651 Building Fair Cash Val: 84,231 **Non-Farm Value: 90,882**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	6358
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	7164

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1988	\$32,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-310-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-310-003-00 110 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KEAFER RICHARD E SR & LORI A

110 COMMONWEALTH AVE
PO BOX 334
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,677** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-310-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,224.66		ESTIMATED	2024 Taxes: \$ 1,732.91	
Legal Description KINCAID LT 16 BLK 9 151956.000 90-03771 50X163.90 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,247	0	19,025	0	21,272		
	2024	2,217	0	26,460	0	28,677		

Land Fair Cash Val: 6,651 Building Fair Cash Val: 79,380 **Non-Farm Value: 86,031**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD IMPROVEMENT	6000 1067

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1990	\$20,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-310-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-310-004-00 108 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MANN SCOTT D & JACQUELINE R

108 COMMONWEALTH AVE
PO BOX 784
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,480** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-310-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,061.16		ESTIMATED	2024 Taxes: \$ 1,241.34	
Legal Description KINCAID LT 15 BLK 9 151955.000 91-05827 50X164 12-10-F 91-05827	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,247	0	16,986	0	19,233		
	2024	2,217	0	19,263	0	21,480		

Land Fair Cash Val: 6,651 Building Fair Cash Val: 57,789 **Non-Farm Value: 64,440**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1991	\$27,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-310-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-310-005-00 106 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MANN STEVE G & TRACEY L

106 COMMONWEALTH AVE
PO BOX 32
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$34,740 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 13,290 Building Fair Cash Val: 90,930 Non-Farm Value: 104,220

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year 2023, Tax Year 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-310-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-310-007-00 102 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREGORY MARC S

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,487** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-310-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,520.66	ESTIMATED			2024 Taxes: \$ 1,723.05
Legal Description KINCAID LOTS 11 & 12 BLK 9 124X122'AV 2002R06698 151952.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,769	0	16,194	0	18,963		
	2024	2,727	0	18,760	0	21,487		

Land Fair Cash Val: 8,181 Building Fair Cash Val: 56,280 **Non-Farm Value: 64,461**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/27/2017	\$50,254	2017R01514	No
08/14/2017	\$21,800	2017R02930	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-310-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-310-010-00 103 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

PAINE CHRISTIAN MICHAEL & PEYTON IRENE

PO BOX 1026
103 EDISON ST
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$30,997 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 15,009 Building Fair Cash Val: 77,982 Non-Farm Value: 92,991

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Exemption History, Amount, Tax Year 2023, Tax Year 2024.

Table with columns: Sales History, Date Sold, Sale Price, Doc#, Qualified?.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-310-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-310-011-00 105 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FOILES MARIE

105 EDISON AVE
PO BOX 676
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,707** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-310-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,373.34	ESTIMATED			2024 Taxes: \$ 1,419.93
Legal Description KINCAID LT 8 BLK 9 151948.000 83-45706 50X165 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,247	0	20,879	0	23,126		
	2024	2,217	0	21,490	0	23,707		

Land Fair Cash Val: 6,651 Building Fair Cash Val: 64,470 **Non-Farm Value: 71,121**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2005	\$50,000	2005R05031	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-310-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-310-012-00 107 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HALLINGSTAD DONNA M &
 JAMES M HUGHES
 P O BOX
 107 EDISON ST
 KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,063** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-310-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 501.04	ESTIMATED			2024 Taxes: \$ 501.03
Legal Description KINCAID LOTS 6 & 7 BLK 9 151947.000 2003R10065 100X165 12-10-F 2002R03674 1996R00427 1996R00428	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,496	0	16,182	0	20,678		
	2024	4,430	0	14,633	0	19,063		

Land Fair Cash Val: 13,290 Building Fair Cash Val: 43,899 **Non-Farm Value: 57,189**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	3430
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	1815

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1996	\$14,500		Yes
07/29/2020	\$49,900	2020R02771	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-310-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-310-014-00 111 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DRURY GEOFFRY & JUDY A

Address to send notice if different than shown at left:

PO BOX 303
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,014** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-310-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 935.50		ESTIMATED 2024 Taxes: \$ 963.41	
Legal Description KINCAID LT 5 BLK 9 151945.000 89-6619 50X165 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,247	0	15,419	0	17,666	
	2024	2,217	0	15,797	0	18,014	

Land Fair Cash Val: 6,651 Building Fair Cash Val: 47,391 **Non-Farm Value: 54,042**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/1989	\$12,000		Yes
01/26/2007	\$15,000	2007R00438	No
05/26/2009	\$45,500	2009R03068	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-310-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-310-015-00 113 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HENSON HAROLD R & MARY A TR
HENSON RTA #112231

PO BOX 866
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$24,227 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 6,651 Building Fair Cash Val: 66,030 Non-Farm Value: 72,681

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes data for 09/12/2005 sale.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-310-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-310-016-00 115 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRADY BRANDON S & HOPE A

Address to send notice if different than shown at left:

PO BOX 1035
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,850** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-310-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,964.02		ESTIMATED		2024 Taxes: \$ 1,992.73
Legal Description KINCAID LT 3 BLK 9 2003R09808 151943.000 B214 P458 50X165 12-10-F		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	2,247	0	28,245	0	30,492	
		2024	2,217	0	28,633	0	30,850	

Land Fair Cash Val: 6,651 Building Fair Cash Val: 85,899 **Non-Farm Value: 92,550**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/2003	\$52,500		Yes
06/01/2010	\$87,900	2010R02248	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-310-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-310-017-00 117 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

FLEMING MATTHEW

Address to send notice if different than shown at left:

PO BOX 926
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$17,730 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for Year, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 5,631 Building Fair Cash Val: 47,559 Non-Farm Value: 53,190

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Includes one row of data)

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-310-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-310-018-00 119 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROWN ALBERT E

Address to send notice if different than shown at left:

PO BOX 691
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,090** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-310-018-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 587.72	ESTIMATED			2024 Taxes: \$ 728.93
Legal Description KINCAID LT 1 BLK 9 151941.000 79-28909 50X165 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,247	0	11,082	0	13,329		
	2024	2,217	0	12,873	0	15,090		

Land Fair Cash Val: 6,651 Building Fair Cash Val: 38,619 **Non-Farm Value: 45,270**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1979	\$24,900		Yes
11/20/2017	\$32,500	2017R04173	Yes
05/10/2018	\$88,000	2018R01468	No
06/09/2020	\$14,000	2020R01966	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-310-018-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-001-00 122 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

JOHNSON KEVIN M

122 EDISON ST
PO BOX 514
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$30,997 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 7,050 Building Fair Cash Val: 85,941 Non-Farm Value: 92,991

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows 6000 for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows sales history from 1979 to 2022.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-002-00 118 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOUSEMAN HAYLEE

Address to send notice if different than shown at left:

PO BOX 78
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,664** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change: ASSESSMENT INCREASED DUE TO REMODELING.

Parcel Number 15-12-10-311-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,507.64		ESTIMATED	2024 Taxes: \$ 2,138.19
Legal Description KINCAID ALL LT 20 & S1/2 LT 21 BLK 41 152361.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
93-06644 60.5X125 12-10-F	2023	2,383	0	34,888	0	37,271	
	2024	2,350	0	30,314	0	32,664	

Land Fair Cash Val: 7,050 Building Fair Cash Val: 90,942 **Non-Farm Value: 97,992**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1993	\$47,000	1993R06644	Yes
01/04/2005	\$30,000	2005R00058	Yes
06/11/2012	\$59,900	2012R03155	Yes
09/09/2016	\$63,000	2016R03335	No
06/29/2022	\$40,000	2022R02396	No
12/19/2022	\$98,000	2022R04510	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-003-00 116 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LESKO STEPHEN

116 EDISON ST
PO BOX 936
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,040** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-311-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 811.44	ESTIMATED			2024 Taxes: \$ 410.49
Legal Description KINCAID LT 19 BLK 41 152360.000 85-7635 40.5X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,596	0	16,523	0	18,119		
	2024	1,573	0	18,467	0	20,040		

Land Fair Cash Val: 4,719 Building Fair Cash Val: 55,401 **Non-Farm Value: 60,120**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	0
2024	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
	SEN FREEZE	1921

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-004-00 114 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOURLARD NORMA J

114 EDISON AVE
PO BOX 474
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,846** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-311-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 825.48	ESTIMATED			2024 Taxes: \$ 949.93
Legal Description KINCAID LT 18 BLK 41 152359.000 40.5X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,596	0	19,698	0	21,294		
	2024	1,573	0	21,273	0	22,846		

Land Fair Cash Val: 4,719 Building Fair Cash Val: 63,819 **Non-Farm Value: 68,538**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY OWNER OCCUPD	5000 6000
2024	ELDERLY OWNER OCCUPD	5000 6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-005-00 112 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BAKER SHELLY

Address to send notice if different than shown at left:

PO BOX 1024
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,056** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-311-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 848.74	ESTIMATED			2024 Taxes: \$ 1,046.96
Legal Description KINCAID LT 17 BLK 41 89-11452 152358.000 95-06000 40.5X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,596	0	14,988	0	16,584		
	2024	1,573	0	17,483	0	19,056		

Land Fair Cash Val: 4,719 Building Fair Cash Val: 52,449 **Non-Farm Value: 57,168**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1989	\$6,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-006-00 MAPLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOURLARD NORMA J

Address to send notice if different than shown at left:

PO BOX 474
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,033** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-311-006-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 84.20		ESTIMATED 2024 Taxes: \$ 82.84	
Legal Description KINCAID N1/2 LOTS 15 & 16 BLK 41 152357.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,050	0	0	0	1,050	
	2024	1,033	0	0	0	1,033	

Land Fair Cash Val: 3,099 Building Fair Cash Val: 0 **Non-Farm Value: 3,099**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-008-00 402 MAPLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NEWINGHAM JOSEPH & JULITTA

402 MAPLE ST
PO BOX 844
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,390** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-311-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID LOTS 12 13 & 14 & S1/2 LOTS 15 & 16 BLK 41 1992R03992 129X100' & 86X50' 152353.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,593	0	33,508	0	40,101		
	2024	6,497	0	33,893	0	40,390		

Land Fair Cash Val: 19,491 Building Fair Cash Val: 101,679 **Non-Farm Value: 121,170**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled 70-100% Ve	34101
2024	OWNER OCCUPD	6000
	Disabled 70-100% Ve	34390

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1992	\$3,150		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-009-00 113 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WATSON DENIS & GINA

113 RICHARDSON AVE
PO BOX 451
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,660** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-311-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 959.00	ESTIMATED			2024 Taxes: \$ 1,095.40
Legal Description KINCAID LT 11 BLK 41 152352.000 83-46064 40.5X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,596	0	21,363	0	22,959		
	2024	1,573	0	23,087	0	24,660		

Land Fair Cash Val: 4,719 Building Fair Cash Val: 69,261 **Non-Farm Value: 73,980**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1983	\$29,900		No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-010-00 115 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DURBIN MARLIN E & TEENA M

PO BOX 115
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,780** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-311-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 133.04	ESTIMATED			2024 Taxes: \$ 133.04
Legal Description KINCAID LT 10 BLK 41 152351.000 86-18056 40.5X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,596	0	21,119	0	22,715		
	2024	1,573	0	21,207	0	22,780		

Land Fair Cash Val: 4,719 Building Fair Cash Val: 63,621 **Non-Farm Value: 68,340**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	SEN FREEZE IMPROVEMENT	9902 154
2024	SEN FREEZE IMPROVEMENT	9967 154

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/26/2014	\$37,500	2014R03312	Yes
08/09/2017	\$55,000	2017R02896	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-011-00 117 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROWN STEVEN R & PEGGY S

117 RICHARDSON AVE
PO BOX 894
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,173** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-311-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 281.80	ESTIMATED			2024 Taxes: \$ 281.79
Legal Description KINCAID LOT 9 BLK 41 152350.000 73-8377 40.5X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,596	0	14,936	0	16,532		
	2024	1,573	0	16,600	0	18,173		

Land Fair Cash Val: 4,719 Building Fair Cash Val: 49,800 **Non-Farm Value: 54,519**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	2018
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	3659

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-012-00 119 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DURBIN BRIAN & JAIME

PO BOX 43
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,770** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-311-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 296.14	ESTIMATED			2024 Taxes: \$ 623.08
Legal Description KINCAID LT 8 BLK 41 152349.000 2001-03076 40.5X125 12-10-F 98-03570 93-7672	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,596	0	8,097	0	9,693		
	2024	1,573	0	12,197	0	13,770		

Land Fair Cash Val: 4,719 Building Fair Cash Val: 36,591 **Non-Farm Value: 41,310**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/19/2012	\$5,000	2012R06929	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-013-00 121 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREGORY MARC S & MELANIE S

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,998** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-311-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,242.88	ESTIMATED			2024 Taxes: \$ 1,924.40
Legal Description KINCAID LT 7 BLK 41 152348.000 B308 P55 40.5X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,596	0	19,903	0	21,499		
	2024	1,573	0	22,425	0	23,998		

Land Fair Cash Val: 4,719 Building Fair Cash Val: 67,275 **Non-Farm Value: 71,994**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

<u>Exemption History</u>	<u>Amount</u>
Tax Year 2023 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/12/2021	\$60,000	2021R01423	Yes
11/14/2023	\$72,000	2023R03353	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-014-00 123 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

GRAHAM JOHN

Address to send notice if different than shown at left:

1590 N 1800 EAST RD
TAYLORVILLE IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$12,746 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 4,719 Building Fair Cash Val: 33,519 Non-Farm Value: 38,238

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes sales history for 05/01/2004 and 09/23/2019.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-015-00 409 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GERMAN JAMES L

409 PRAIRIE ST
PO BOX 715
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,010** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-311-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,290.66	ESTIMATED			2024 Taxes: \$ 1,444.23
Legal Description KINCAID LTS 4 & 5 BLK 41 152346.000 75-1341 86X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,387	0	18,708	0	22,095		
	2024	3,340	0	20,670	0	24,010		

Land Fair Cash Val: 10,020 Building Fair Cash Val: 62,010 **Non-Farm Value: 72,030**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-016-00 407 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HART MAKENZIE M

Address to send notice if different than shown at left:

407 PRAIRIE ST
KINCAID IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,331** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-311-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,196.18	ESTIMATED			2024 Taxes: \$ 1,742.69
Legal Description KINCAID LT 3 BLK 41 152344.000 43X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,694	0	32,292	0	33,986		
	2024	1,670	0	26,661	0	28,331		

Land Fair Cash Val: 5,010 Building Fair Cash Val: 79,983 **Non-Farm Value: 84,993**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 599
2024	OWNER OCCUPD IMPROVEMENT	6000 599

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/13/2005	\$25,000	2005R03380	No
10/29/2020	\$14,000	2020R04239	No
08/18/2021	\$85,000	2021R03525	No
09/16/2024	\$115,000	2024R02774	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-017-00 405 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MICHEL ROBERT L & SHARON A (LSR)
FOR SHANE & TIFFANY BROWN (LSE)

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,203** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-311-017-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 629.34	ESTIMATED			2024 Taxes: \$ 978.56
Legal Description KINCAID LOT 2 BLK 41 1998R08773 BK289 PG312 43X125' 152343.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,694	0	12,154	0	13,848		
	2024	1,670	0	16,533	0	18,203		

Land Fair Cash Val: 5,010 Building Fair Cash Val: 49,599 **Non-Farm Value: 54,609**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000
2024	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/22/2012	\$25,750	2012R02779	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-311-018-00 403 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOLMES JOHN A

403 PRAIRIE ST
PO BOX 171
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,490** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-311-018-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 417.00	ESTIMATED			2024 Taxes: \$ 1,482.72
Legal Description KINCAID LT 1 BLK 41 153342.000 85-10762 42X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,653	0	18,434	0	20,087		
	2024	1,630	0	16,860	0	18,490		

Land Fair Cash Val: 4,890 Building Fair Cash Val: 50,580 **Non-Farm Value: 55,470**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023	
OWNER OCCUPD	6000
ELDERLY	5000
SEN FREEZE	3887

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1985	\$26,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-311-018-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-312-001-00 114 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NANCE JENNIFER &
DONALD W LINDSAY
P O BOX 613
114 RICHARDSON ST
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,587** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-312-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,420.58	ESTIMATED			2024 Taxes: \$ 1,249.92
Legal Description KINCAID LOT 20 BLK 7 50X125' 151940.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,968	0	21,747	0	23,715		
	2024	1,940	0	19,647	0	21,587		

Land Fair Cash Val: 5,820 Building Fair Cash Val: 58,941 **Non-Farm Value: 64,761**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/24/2020	\$58,500	2020R03233	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-312-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-312-002-00 112 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRANDON MARY S

112 RICHARDSON AVE
PO BOX 401
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,037** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-312-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,160.92	ESTIMATED	2024 Taxes: \$ 1,286.01
Legal Description KINCAID LT 19 BLK 7 151939.000 96-01437 50X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL
	2023	1,968	0	18,509	0	20,477
	2024	1,940	0	20,097	0	22,037

Land Fair Cash Val: 5,820 Building Fair Cash Val: 60,291 Non-Farm Value: 66,111

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-312-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-312-003-00 110 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DURBIN JOHN H & JILL A

110 RICHARDSON AVE
PO BOX 633
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,530** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-312-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,310.48	ESTIMATED			2024 Taxes: \$ 1,566.11
Legal Description KINCAID LT 18 BLK 7 CFD 99 151938.000 91-05635 50X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,968	0	20,374	0	22,342		
	2024	1,940	0	23,590	0	25,530		

Land Fair Cash Val: 5,820 Building Fair Cash Val: 70,770 **Non-Farm Value: 76,590**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1991	\$11,900		Yes
07/15/2020	\$33,000	2020R02564	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-312-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-312-004-00 108 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILLS CHRISTOPHER L JR

PO BOX
108 RICHARDSON ST
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,120** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-312-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,467.54	ESTIMATED			2024 Taxes: \$ 2,174.76
Legal Description KINCAID LTS 16 & 17 BLK 7 151937.000 B193 P508 100X124 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,942	0	33,434	0	37,376		
	2024	3,883	0	29,237	0	33,120		

Land Fair Cash Val: 11,649 Building Fair Cash Val: 87,711 **Non-Farm Value: 99,360**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	605

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/27/2005	\$56,900	2005R05529	No
06/23/2008	\$77,000	2008R03335	No
10/12/2011	\$79,500	2011R04604	Yes
09/15/2017	\$80,000	2017R03353	No
09/20/2019	\$88,000	2019R03216	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-312-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-312-005-00 102 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HALBERT JOHN P & ELIZABETH A

102 RICHARDSON AVE
PO BOX 582
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,474** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-312-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,588.98	ESTIMATED			2024 Taxes: \$ 1,882.38
Legal Description KINCAID LTS 14 & 15 BLK 7 151934.000 92-4802 106X177X123.712-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,176	0	26,639	0	30,815		
	2024	4,117	0	30,357	0	34,474		

Land Fair Cash Val: 12,351 Building Fair Cash Val: 91,071 **Non-Farm Value: 103,422**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-312-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-312-006-00 100 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BREST ABIGAIL D & DANIEL SR

100 RICHARDSON AVE
PO BOX 524
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$3,716 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 4,719 Building Fair Cash Val: 6,429 Non-Farm Value: 11,148

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Lists exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-312-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-312-007-00 103 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROCCARDO BRIAN A

Address to send notice if different than shown at left:

PO BOX 24
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,530** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-312-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 266.24	ESTIMATED			2024 Taxes: \$ 603.83
Legal Description KINCAID LT 12 BLK 7 151932.000 92-5728 37X144 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,567	0	7,753	0	9,320		
	2024	1,547	0	11,983	0	13,530		

Land Fair Cash Val: 4,641 Building Fair Cash Val: 35,949 **Non-Farm Value: 40,590**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1992	\$15,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-312-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-312-008-00 107 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LANDERS PATRICK S

Address to send notice if different than shown at left:

107 NORTH AVE
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,283** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-312-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,268.78	ESTIMATED			2024 Taxes: \$ 2,268.02
Legal Description KINCAID LTS 10 & 11 BLK 7 151930.000 75.74X129AV 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,015	0	12,807	0	15,822		
	2024	2,973	0	25,310	0	28,283		

Land Fair Cash Val: 8,919 Building Fair Cash Val: 75,930 **Non-Farm Value: 84,849**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/16/2024	\$41,100	2024R00418	No
09/18/2024	\$125,000	2024R02808	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-312-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-312-009-00 109 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CONRATH MARY

109 NORTH AVE
PO BOX 476
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,516** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-312-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 953.62	ESTIMATED			2024 Taxes: \$ 1,244.23
Legal Description KINCAID LT 9 BLK 7 151929.000 78-21498 38X119AV 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,465	0	21,427	0	22,892		
	2024	1,443	0	25,073	0	26,516		

Land Fair Cash Val: 4,329 Building Fair Cash Val: 75,219 **Non-Farm Value: 79,548**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-312-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-312-010-00 111 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MAGOS KAY & LOUIS

111 NORTH AVE
PO BOX 121
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,637** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-312-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 632.14	ESTIMATED			2024 Taxes: \$ 632.14
Legal Description KINCAID S1/2 LOT 7 & ALL LOT 8 BLK 7 151928.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
91-04993 57X120AV 12-10-F	2023	2,198	0	22,893	0	25,091		
	2024	2,167	0	23,470	0	25,637		

Land Fair Cash Val: 6,501 Building Fair Cash Val: 70,410 **Non-Farm Value: 76,911**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY SEN FREEZE	6000 5000 6754

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-312-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-312-012-00 117 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SMOTHERS RONALD & KAREN

117 NORTH AVE
PO BOX 23
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$39,163 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 15,369 Building Fair Cash Val: 102,120 Non-Farm Value: 117,489

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Lists exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-312-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-312-013-00 121 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CRAIN LUKE L

Address to send notice if different than shown at left:

1710 N 800 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,210** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-312-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 1,054.82
Legal Description KINCAID LT 3 & N1/2 LT 4 BLK 7 151923.000 98-05364 75X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,953	0	15,817	0	18,770		
	2024	2,913	0	22,297	0	25,210		

Land Fair Cash Val: 8,739 Building Fair Cash Val: 66,891 **Non-Farm Value: 75,630**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	7770
2024	OWNER OCCUPD	6000
	IMPROVEMENT	6056

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/30/2023	\$29,000	2023R00276	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-312-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-312-014-00 123 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WILLIAMS ALYSSAA

123 NORTH AVE
PO BOX 1175
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,157** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-312-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,199.66		ESTIMATED	2024 Taxes: \$ 1,536.20	
Legal Description KINCAID LT 2 BLK 7 82-42695 151922.000 97-1012 50X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,968	0	18,992	0	20,960		
	2024	1,940	0	23,217	0	25,157		

Land Fair Cash Val: 5,820 Building Fair Cash Val: 69,651 **Non-Farm Value: 75,471**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/20/2008	\$50,000	2008R05309	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-312-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-312-015-00 125 NORTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RODDEN MICHAEL E

Address to send notice if different than shown at left:

PO BOX 565
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,550** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-312-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 467.68	ESTIMATED			2024 Taxes: \$ 1,487.53
Legal Description KINCAID LT 1 BLK 7 151921.000 2003R08935 50X125 12-10-F 1983R45436 2003R05161 1997R02330	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,968	0	14,099	0	16,067		
	2024	1,940	0	16,610	0	18,550		

Land Fair Cash Val: 5,820 Building Fair Cash Val: 49,830 **Non-Farm Value: 55,650**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT Leasehold Owner	4235 6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1997	\$30,000		Yes
07/30/2013	\$7,500	2013R03392	No
11/08/2013	\$18,000	2013R05053	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-312-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-313-001-00 110 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOOMEY DONALD W & BRIDGET L

Address to send notice if different than shown at left:

PO BOX 225
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,250** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-313-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,014.26		ESTIMATED		2024 Taxes: \$ 1,543.66
Legal Description KINCAID LT 22 BLK 40 152341.000 2004R02379 40.5X125 12-10-F 74-15103	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,596	0	17,052	0	18,648		
	2024	1,573	0	17,677	0	19,250		

Land Fair Cash Val: 4,719 Building Fair Cash Val: 53,031 **Non-Farm Value: 57,750**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/10/2007	\$47,000	2007R01712	Yes
12/15/2009	\$36,300	2009R06917	Yes
07/26/2011	\$35,250	2011R03199	Yes
05/20/2013	\$45,000	2013R02112	Yes
11/23/2020	\$39,000	2020R04688	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-313-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-313-002-00 108 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

LOVEKAMP FRANCES JOANNE

108 E EDISON AVE
PO BOX 266
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$26,130 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 9,429 Building Fair Cash Val: 68,961 Non-Farm Value: 78,390

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Exemption History, Amount, Tax Year. Rows for 2023 and 2024 with exemptions: OWNER OCCUPD ELDERLY.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Row: 08/23/2006, \$58,000, 2006R04113, Yes.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-313-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-313-003-00 104 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOURLARD DAVID A

Address to send notice if different than shown at left:

PO BOX 475
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,793** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-313-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,093.16		ESTIMATED		2024 Taxes: \$ 1,266.44
Legal Description KINCAID LT 19 BLK 40 152338.000 93-04173 40.5X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,596	0	18,036	0	19,632		
	2024	1,573	0	20,220	0	21,793		

Land Fair Cash Val: 4,719 Building Fair Cash Val: 60,660 **Non-Farm Value: 65,379**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-313-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-313-004-00 102 EDISON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HANLON CORT A
%MARY HANLON

PO BOX 226
TOVEY IL 62570

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,526** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-313-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 577.70	ESTIMATED			2024 Taxes: \$ 683.70
Legal Description KINCAID LT 18 BLK 40 98-0283 152337.000 82-43383 40.5X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,596	0	11,608	0	13,204		
	2024	1,573	0	12,953	0	14,526		

Land Fair Cash Val: 4,719 Building Fair Cash Val: 38,859 **Non-Farm Value: 43,578**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/1998	\$21,000		Yes
03/29/2021	\$35,000	2021R01248	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-313-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-313-005-00 400 DIAL ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MELVIN CHARLES W II & ALICIA A

400 DIAL ST
PO BOX 484
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,733** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-313-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,733.88	ESTIMATED			2024 Taxes: \$ 1,903.15
Legal Description KINCAID LT 17 BLK 40 152336.000 2004R01278 40.5X125 12-10-F BK213 PG195	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,596	0	26,026	0	27,622		
	2024	1,573	0	28,160	0	29,733		

Land Fair Cash Val: 4,719 Building Fair Cash Val: 84,480 **Non-Farm Value: 89,199**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/2004	\$59,900		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-313-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-313-006-00 402 DIAL ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COOPER JOHN

PO BOX 322
402 DIAL ST
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,333** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-313-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 900.38	ESTIMATED			2024 Taxes: \$ 172.65
Legal Description KINCAID LT 16 BLK 40 152335.000 93-04417 42X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,653	0	15,575	0	17,228		
	2024	1,630	0	1,703	0	3,333		

Land Fair Cash Val: 4,890 Building Fair Cash Val: 5,109 **Non-Farm Value: 9,999**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2024	OWNER OCCUPD	1180

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1993	\$23,000		Yes
10/11/2022	\$10,000	2022R03717	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-313-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-313-007-00 404 DIAL ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TARRANT JESSICA

404 DIAL ST
PO BOX 404
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,537** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-313-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 988.18	ESTIMATED			2024 Taxes: \$ 1,326.11
Legal Description KINCAID LTS 14 & 15 BLK 40 152334.000 B266 P111 86X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,387	0	14,936	0	18,323		
	2024	3,340	0	19,197	0	22,537		

Land Fair Cash Val: 10,020 Building Fair Cash Val: 57,591 **Non-Farm Value: 67,611**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/22/2010	\$44,400	2010R02618	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-313-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-313-008-00 408 DIAL ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

PEAT RICHARD B JR

Address to send notice if different than shown at left:

PO BOX 1173
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$24,400 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 10,020 Building Fair Cash Val: 63,180 Non-Farm Value: 73,200

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Exemption History, Amount, Tax Year. Shows Disabled Person exemptions for 2023 and 2024.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows sales history from 2003 to 2009.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-313-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-313-009-00 105 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MONTS RACHEL

PO BOX 1141
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$45,662** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-313-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,270.32	ESTIMATED			2024 Taxes: \$ 3,180.50
Legal Description KINCAID LTS 9 10 11 BLK 40 2001-00917 152330.000 121.5X125 12-10-F 73-8400	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,057	0	42,725	0	46,782		
	2024	4,000	0	41,662	0	45,662		

Land Fair Cash Val: 12,000 Building Fair Cash Val: 124,986 **Non-Farm Value: 136,986**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1992	\$43,010		Yes
12/31/2015	\$5,000	2015R05074	No
01/19/2017	\$115,000	2017R00236	No
12/22/2021	\$137,000	2021R05438	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-313-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-313-010-00 107 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JOHNSON NICHOLAS P

Address to send notice if different than shown at left:

PO BOX 714
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$46,996** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-313-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,993.66		ESTIMATED	2024 Taxes: \$ 3,287.48	
Legal Description KINCAID LTS 7 & 8 BLK 40 152329.000 90-05926 81X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,191	0	40,141	0	43,332		
	2024	3,143	0	43,853	0	46,996		

Land Fair Cash Val: 9,429 Building Fair Cash Val: 131,559 **Non-Farm Value: 140,988**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/24/2021	\$130,000	2021R02571	Yes
06/01/2022	\$141,000	2022R02017	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-313-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-313-011-00 111 RICHARDSON AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NEWINGHAM JOSEPH D & JULITTA S

402 MAPLE ST
PO BOX 844
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,030** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-313-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,444.72	ESTIMATED			2024 Taxes: \$ 1,445.83
Legal Description KINCAID LT 6 BLK 40 152328.000 2001-03102 40.5X125 12-10-F 87-19129	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,596	0	16,420	0	18,016		
	2024	1,573	0	16,457	0	18,030		

Land Fair Cash Val: 4,719 Building Fair Cash Val: 49,371 **Non-Farm Value: 54,090**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-313-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-313-013-00 409 MAPLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RADATZ WILLIAM J

409 MAPLE PL
PO BOX 571
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,664** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-313-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,249.26	ESTIMATED			2024 Taxes: \$ 2,058.00
Legal Description KINCAID LOTS 1 2 3 4 & 5 BLK 40 1981R37048 214X100 152326.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,515	0	26,534	0	34,049		
	2024	7,407	0	24,257	0	31,664		

Land Fair Cash Val: 22,221 Building Fair Cash Val: 72,771 **Non-Farm Value: 94,992**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/15/2022	\$95,000	2022R01387	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-313-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-314-001-00 300 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCHMIDT JULIE & JULIA GRAHAM

300 ELM ST
PO BOX 927
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,177** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-314-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,877.26		ESTIMATED		2024 Taxes: \$ 2,018.95
Legal Description KINCAID LTS 4 & 5 BLK 47 2002-07875 152496.000 81-36154 70X120AV 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,698	0	26,712	0	29,410		
	2024	2,660	0	28,517	0	31,177		

Land Fair Cash Val: 7,980 Building Fair Cash Val: 85,551 **Non-Farm Value: 93,531**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/2002	\$79,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-314-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-314-002-00 306 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EVANS DENISE L

Address to send notice if different than shown at left:

PO BOX 713
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,867** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-314-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 945.60		ESTIMATED 2024 Taxes: \$ 1,031.81	
Legal Description KINCAID LTS 1 2 & 3 BLK 47 152493.000 B20/P379 187X96X160 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,756	0	20,036	0	22,792	
	2024	2,717	0	21,150	0	23,867	

Land Fair Cash Val: 8,151 Building Fair Cash Val: 63,450 **Non-Farm Value: 71,601**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/31/2012	\$54,000	2012R05997	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-314-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-315-001-00 417 DIAL ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SONA CORPORATION I

Address to send notice if different than shown at left:

PO BOX 736
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$118,800** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-315-001-00	Class 0060	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 9,249.46	ESTIMATED			2024 Taxes: \$ 9,526.60
Legal Description BEG W COR BLK 4 TH E247 SWLY 135.46 NWLY 230 98-04120 151789.001 89-11116 247X230X135 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	19,223	0	96,121	0	115,344		
	2024	19,800	0	99,000	0	118,800		

Land Fair Cash Val: 59,400 Building Fair Cash Val: 297,000 **Non-Farm Value: 356,400**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1998	\$244,500		Yes
04/08/2010	\$200,000	2010R01492	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-315-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-315-002-00 410 SPRINGFIELD RD KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PELLINGHELLI GIUSEPPE L JR

Address to send notice if different than shown at left:

PO BOX 1195
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,827** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-315-002-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,958.90	ESTIMATED			2024 Taxes: \$ 1,990.88
Legal Description KINCAID TR 76X73 IN BLK 4 151789.002 97-02137 76X73 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,433	0	27,995	0	30,428		
	2024	2,397	0	28,430	0	30,827		

Land Fair Cash Val: 7,191 Building Fair Cash Val: 85,290 **Non-Farm Value: 92,481**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-315-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-315-003-00 420 SPRINGFIELD RD KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BAJRAMI JACLYN H TRUSTEE

Address to send notice if different than shown at left:

PO BOX 897
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,296** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-315-003-00	Class 0061	Acreage 0.350	Print Date 9/23/2024	2023 Taxes: \$ 2,547.88		ESTIMATED	2024 Taxes: \$ 2,349.25	
Legal Description KINCAID PRT BLK 4 151789.003 89-11273 136X90AV 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,878	0	25,895	0	31,773		
	2024	5,793	0	23,503	0	29,296		

Land Fair Cash Val: 17,379 Building Fair Cash Val: 70,509 **Non-Farm Value: 87,888**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/30/2020	\$85,000	2020R00352	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-315-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-315-004-00 430 MARKET ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KEMMERLING MARVIN G JR

Address to send notice if different than shown at left:

PO BOX 505
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$66,120** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-315-004-00	Class 0060	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 5,147.66		ESTIMATED	2024 Taxes: \$ 5,302.18
Legal Description KINCAID E160' BLK 4 EX N70 STORE & LAUNDRY MAT & OFFICE 151790.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	8,376	0	55,817	0	64,193	
	2024	8,628	0	57,492	0	66,120	

Land Fair Cash Val: 25,884 Building Fair Cash Val: 172,476 **Non-Farm Value: 198,360**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-315-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-315-005-00 DIAL ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KEMMERLING MARVIN G JR

Address to send notice if different than shown at left:

PO BOX 505
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,086** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-315-005-00	Class 0060	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,018.74		ESTIMATED	2024 Taxes: \$ 1,049.37	
Legal Description KINCAID PRT BLK 4 M.H. PARK 4 PADS 151789.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,352	0	6,352	0	12,704		
	2024	6,543	0	6,543	0	13,086		

Land Fair Cash Val: 19,629 Building Fair Cash Val: 19,629 **Non-Farm Value: 39,258**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-315-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-316-001-00 501 DIAL ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KUNZ LINDA S & LOUIS J

501 DIAL ST
PO BOX 805
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,287** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-316-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 581.70	ESTIMATED			2024 Taxes: \$ 581.70
Legal Description KINCAID RESUB LT 1 LTS 41 42 43 44 BLK 1 186X134X112AV 84-4578 2004R01163 ST DOC# 84-11-37	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,362	0	20,103	0	22,465		
	2024	2,327	0	22,960	0	25,287		

Land Fair Cash Val: 6,981 Building Fair Cash Val: 68,880 **Non-Farm Value: 75,861**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	4211
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	7033

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/2004	\$27,000		Yes
04/10/2006	\$39,500	2006R01655	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-316-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-316-002-00 120 MARKET ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KINCAID CHURCH OF GOD

Address to send notice if different than shown at left:

PO BOX 589
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-316-002-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID RESUB LT 1 LTS 36 THRU 40 BLK 1 DOC NO 85 11 87 CHURCH 125X141 151702.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-10-316-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-316-003-00 118 MARKET ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KINCAID CHURCH OF GOD

Address to send notice if different than shown at left:

PO BOX 589
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-316-003-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID RESUB LT 1 LT 35 BLK 1 25X141 98-08132 151701.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-10-316-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-316-004-00 100 MARKET ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MIDLAND COMMUNITY BANK

Address to send notice if different than shown at left:

PO BOX 380
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$142,350** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-316-004-00	Class 0060	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11,082.62		ESTIMATED 2024 Taxes: \$ 11,415.07	
Legal Description KINCAID RESUB LT 1 W104 LTS 26 THRU 34 BLK 1 88-2978 151700.001 74-12038 277X160 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	17,330	0	120,874	0	138,204	
	2024	17,850	0	124,500	0	142,350	

Land Fair Cash Val: 53,550 Building Fair Cash Val: 373,500 **Non-Farm Value: 427,050**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-316-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-316-004-01 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SEDLOCK GARY PHOTOGRAPHY INC

Address to send notice if different than shown at left:

PO BOX 860
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,800** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-316-004-01	Class 0063	Acreage 0.320	Print Date 9/23/2024	2023 Taxes: \$ 146.36		ESTIMATED		2024 Taxes: \$ 144.34
Legal Description PART SW1/4 150115.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,825	0	0	0	1,825		
	2024	1,800	0	0	0	1,800		

Land Fair Cash Val: 5,400 Building Fair Cash Val: 0 **Non-Farm Value: 5,400**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/24/2012	\$2,500	2012R04744	Yes
08/10/2016	\$5,000	2016R02910	Yes
04/28/2017	\$4,500	2017R01533	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-316-004-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-316-005-00 101 STATE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SEDLOCK GARY PHOTOGRAPHY INC

Address to send notice if different than shown at left:

705 RIDGE ST
KINCAID IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,733** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-316-005-00	Class 0060	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,027.72		ESTIMATED		2024 Taxes: \$ 1,101.25
Legal Description KINCAID RESUB LT 1 LTS 18 THR 25 & E36.99 LTS 26 THR 34 BL1 & VACATED ALLEY 151700.000 12-10-G B323 P304	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,408	0	6,408	0	12,816		
	2024	6,600	0	7,133	0	13,733		

Land Fair Cash Val: 19,800 Building Fair Cash Val: 21,399 **Non-Farm Value: 41,199**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/25/2008	\$33,000	2008R05959	No
02/19/2021	\$40,000	2021R00645	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-316-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-316-006-00 117 STATE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF KINCAID

115 CENTRAL AVE
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$337** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-316-006-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED 2024 Taxes: \$ 27.02	
Legal Description KINCAID RESUB LT 1 LT 17 BLK 1 151699.000 25X141 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,050	0	0	0	1,050	
	2024	337	0	0	0	337	

Land Fair Cash Val: 1,011 Building Fair Cash Val: 0 **Non-Farm Value: 1,011**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-316-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-316-007-00 119 STATE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GOESCHEL ALYSHA

Address to send notice if different than shown at left:

306 S 2ND ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,110** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-316-007-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 171.70	ESTIMATED			2024 Taxes: \$ 169.20
Legal Description KINCAID RESUB LT 1 LTS 15 & 16 BLK 1 78-18582 151697.000 96-06000 51X141 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,141	0	0	0	2,141		
	2024	2,110	0	0	0	2,110		

Land Fair Cash Val: 6,330 Building Fair Cash Val: 0 Non-Farm Value: 6,330

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/08/2013	\$3,000	2013R03569	Yes
05/18/2018	\$5,500	2018R01572	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-316-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-316-008-00 123 STATE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CORSO ROMAN

Address to send notice if different than shown at left:

915 W SPRESSER ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,066** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-316-008-00	Class 0060	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 394.46	ESTIMATED			2024 Taxes: \$ 406.24
Legal Description KINCAID RESUB LOT 14 BLK 1 B208 P154 151696.000 92-05869 25X141 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,423	0	3,496	0	4,919		
	2024	1,466	0	3,600	0	5,066		

Land Fair Cash Val: 4,398 Building Fair Cash Val: 10,800 **Non-Farm Value: 15,198**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-316-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-316-009-00 125 STATE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KINCAID CHURCH OF GOD

Address to send notice if different than shown at left:

PO BOX 589
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-316-009-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID RESUB LT 1 LTS 9 THRU 13 BLK 1 CHURCH YARD & PARKING 125X141 77-17661	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-10-316-009-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-316-010-00 135 STATE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CHURCH OF GOD KINCAID

Address to send notice if different than shown at left:

PO BOX 589
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-316-010-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID RESUB LT 1 LT 8 BLK 1 25X141 86-14698 ST DOC# 86-11-4 151690.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0		
	2024	0	0	0	0	0		

15-12-10-316-010-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/16/2015	\$2,000	2015R02760	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-316-011-00 509 DIAL ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KINCAID BAPTIST CHURCH

Address to send notice if different than shown at left:

PO BOX 526
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-316-011-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID RESUB LT 1 LTS 1 THRU 7 BLK 1 CHURCH PARKING LOT ST DOC# 85-11-86 151684.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-10-316-011-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-317-001-00 301 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEADOWS GRACE J & CHARLES R

301 E ELM ST
PO BOX 966
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,300** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-317-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 339.78	ESTIMATED			2024 Taxes: \$ 339.77
Legal Description KINCAID LOTS 19 & 20 BLK 45 152453.000 91-03184 80X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	15,751	0	18,901		
	2024	3,107	0	19,193	0	22,300		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 57,579 **Non-Farm Value: 66,900**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	3664
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	7063

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1991	\$34,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-317-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-317-002-00 307 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HAY JUSTIN & TABATHA MOORE

307 ELM ST
PO BOX 73
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,934** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-317-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,480.56	ESTIMATED			2024 Taxes: \$ 1,598.51
Legal Description KINCAID LOTS 21 & 22 BLK 45 152455.000 81-38136 80X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	21,313	0	24,463		
	2024	3,107	0	22,827	0	25,934		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 68,481 **Non-Farm Value: 77,802**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/03/2006	\$28,000	2006R05517	No
12/04/2006	\$65,000	2006R06036	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-317-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-317-003-00 309 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WATT CHERI

Address to send notice if different than shown at left:

313 ELM ST
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,868** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-317-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,304.22	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID LOT 23 & W10 LOT 24 BLK 45 95-01917 152457.000 93-05548 50X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,968	0	14,296	0	16,264		
	2024	1,968	0	1,900	0	3,868		

Land Fair Cash Val: 5,904 Building Fair Cash Val: 5,700 **Non-Farm Value: 11,604**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/21/2023	\$3,000	2023R03441	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-317-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-317-004-00 313 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WATT CHERI

PO BOX
313 ELM ST
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,050** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-317-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,134.94	ESTIMATED			2024 Taxes: \$ 1,607.81
Legal Description KINCAID LOTS 23 24 25 BLK 45 152459.000 88-2858 120X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,756	0	17,397	0	20,153		
	2024	4,660	0	22,390	0	27,050		

Land Fair Cash Val: 13,980 Building Fair Cash Val: 67,170 **Non-Farm Value: 81,150**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2024	IMPROVEMENT	1000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1988	\$18,000		Yes
10/27/2006	\$15,000	2006R05363	Yes
08/15/2008	\$55,250	2008R04249	No
05/13/2022	\$65,000	2022R01766	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-317-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-317-005-00 315 ELM ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CASEY PATRICIA A & BILLY G

315 ELM ST
PO BOX 461
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,313** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-317-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 595.58	ESTIMATED			2024 Taxes: \$ 595.57
Legal Description KINCAID LOTS 26 & 27 BLK 45 152460.000 73-6569 150X125AV 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,910	0	20,321	0	26,231		
	2024	5,823	0	22,490	0	28,313		

Land Fair Cash Val: 17,469 Building Fair Cash Val: 67,470 **Non-Farm Value: 84,939**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	7804
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	9886

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-317-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-317-007-00 332 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH PHYLLIS

332 WALNUT ST
PO BOX 173
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,670** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-317-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 274.42	ESTIMATED			2024 Taxes: \$ 454.68
Legal Description KINCAID LTS 1 & 2 BLK 45 152437.000 40X62& TRI TRACK 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,079	0	16,210	0	17,289		
	2024	1,063	0	15,607	0	16,670		

Land Fair Cash Val: 3,189 Building Fair Cash Val: 46,821 **Non-Farm Value: 50,010**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD SEN FREEZE	6000 2867
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/31/2020	\$46,000	2020R03347	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-317-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-317-010-00 324 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GIBSON CLYDE R & CAROL J

Address to send notice if different than shown at left:

PO BOX 786
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,893** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-317-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID LOTS 3 4 5 & 6 BLK 45 1991R04704 41X110'AV & 80X125' & 43X85'AV 152441.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,042	0	29,809	0	35,851		
	2024	5,953	0	29,940	0	35,893		

Land Fair Cash Val: 17,859 Building Fair Cash Val: 89,820 **Non-Farm Value: 107,679**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled 70-100% Ve IMPROVEMENT	28884
		967
2024	OWNER OCCUPD	6000
	Disabled 70-100% Ve IMPROVEMENT	28926
		967

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-317-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-317-011-00 322 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RUNGE MELVIN E &
MARY LOU HARRIS

PO BOX 634
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,660** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-317-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 588.52	ESTIMATED			2024 Taxes: \$ 588.52
Legal Description KINCAID LT 7 8 & 9 BLK 45 152442.000 120X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,607	0	16,281	0	20,888		
	2024	4,660	0	16,000	0	20,660		

Land Fair Cash Val: 13,980 Building Fair Cash Val: 48,000 **Non-Farm Value: 61,980**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	2549
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	2321

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/28/2020	\$59,900	2020R03734	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-317-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-317-013-00 314 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARION JACQUELINE D

314 WALNUT ST
PO BOX 1092
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,300** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-317-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 740.48	ESTIMATED			2024 Taxes: \$ 745.77
Legal Description KINCAID LOTS 10 & 11 BLK 45 2000-02351 98-06019 152445.000 70-194360 80X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	12,084	0	15,234		
	2024	3,107	0	12,193	0	15,300		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 36,579 **Non-Farm Value: 45,900**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1998	\$32,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-317-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-317-014-00 312 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WOMACK RYAN R & KATIE M (LSR)
FOR SHELBY COOK (LSE)

1574 N 1600 EAST RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,833** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-317-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 999.02	ESTIMATED			2024 Taxes: \$ 1,189.46
Legal Description KINCAID LOT 12 BLK 45 2000-06646 152446.000 89-8544 40X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	16,883	0	18,458		
	2024	1,553	0	19,280	0	20,833		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 57,840 **Non-Farm Value: 62,499**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000
2024	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/03/2017	\$15,000	2017R00003	No
01/03/2017	\$20,000	2017R00005	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-317-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-317-015-00 310 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BASALYGA JAMES J & DONNA J

Address to send notice if different than shown at left:

PO BOX 1015
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,420** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-317-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,151.38	ESTIMATED			2024 Taxes: \$ 1,236.53
Legal Description KINCAID LOT 13 & 14 BLK 45 2002R03892 80X125' 152447.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	17,208	0	20,358		
	2024	3,107	0	18,313	0	21,420		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 54,939 **Non-Farm Value: 64,260**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2002	\$40,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-317-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-317-018-00 302 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VICE JOHN M & SARA A

302 WALNUT ST
PO BOX 333
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,970** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-317-018-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,420.82		ESTIMATED		2024 Taxes: \$ 1,601.40
Legal Description KINCAID LOTS 15, 16 & 17 BLK 45 1979R28564 120X125' 152451.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	27,568	0	30,718		
	2024	3,107	0	29,863	0	32,970		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 89,589 **Non-Farm Value: 98,910**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
2024	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1979	\$5,500		Yes
11/17/2006	\$14,750	2006R05824	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-317-018-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-317-019-00 300 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

FOWLER MATTHEW

PO BOX 572
300 WALNUT ST
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$32,330 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: ASSESSMENT INCREASED DUE TO REMODELING.

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 4,659 Building Fair Cash Val: 92,331 Non-Farm Value: 96,990

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows 2023 and 2024 entries for OWNER OCCUPD.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows sales history from 2000 to 2023.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Includes fields for dollar amounts and initials for Joy, Ed, and Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-317-019-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-002-00 305 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MAXWELL MICHAEL

Address to send notice if different than shown at left:

PO BOX 612
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,693** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-318-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 709.12	ESTIMATED			2024 Taxes: \$ 1,433.24
Legal Description KINCAID LTS 16 17 & 18 BLK 53 152670.000 B213P263 118.55X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,673	0	21,182	0	25,855		
	2024	4,603	0	25,090	0	29,693		

Land Fair Cash Val: 13,809 Building Fair Cash Val: 75,270 **Non-Farm Value: 89,079**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	5683
	IMPROVEMENT	5329
	OWNER OCCUPD	0
2024	IMPROVEMENT	5683
	OWNER OCCUPD	6000
	IMPROVEMENT	137

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/11/2013	\$31,500	2013R00672	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-003-00 307 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ANDREWS CYNTHIA S

Address to send notice if different than shown at left:

PO BOX 153
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,106** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-318-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,080.24		ESTIMATED 2024 Taxes: \$ 1,291.54	
Legal Description KINCAID LOTS 19 & 20 BLK 53 2003R04366 79.4X125' 152671.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,129	0	16,342	0	19,471	
	2024	3,083	0	19,023	0	22,106	

Land Fair Cash Val: 9,249 Building Fair Cash Val: 57,069 **Non-Farm Value: 66,318**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/2002	\$40,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-004-00 311 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FLEMING CHARLES D & RHONDA A

311 WALNUT ST
PO BOX 1186
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,953** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-318-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 40.10	ESTIMATED			2024 Taxes: \$ 236.80
Legal Description KINCAID LT 21 BLK 53 85-07882 152672.000 97-02083 39.7X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,563	0	3,064	0	4,627		
	2024	1,540	0	7,413	0	8,953		

Land Fair Cash Val: 4,620 Building Fair Cash Val: 22,239 **Non-Farm Value: 26,859**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	4127
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-005-00 315 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FLEMING SHIRLEY

315 WALNUT ST
PO BOX 386
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,540** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-318-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID LTS 22 & 23 BLK 53 152674.000 79.4X125 12-10-F		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	3,129	0	15,354	0	18,483	
		2024	3,083	0	15,457	0	18,540	

Land Fair Cash Val: 9,249 Building Fair Cash Val: 46,371 **Non-Farm Value: 55,620**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	7483
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	7540

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-006-00 319 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NIEHAUS AMY H

Address to send notice if different than shown at left:

313 W SPRUCE ST
CHATHAM

IL 62629

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,083** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-318-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,236.46	ESTIMATED			2024 Taxes: \$ 1,289.70
Legal Description KINCAID LTS 24 & 25 BLK 53 152676.000 2000-02560 79.4X125 12-10-F 94-05278 2002-02489 PLAT OF SURVEY	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,129	0	12,290	0	15,419		
	2024	3,083	0	13,000	0	16,083		

Land Fair Cash Val: 9,249 Building Fair Cash Val: 39,000 **Non-Farm Value: 48,249**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2000	\$38,000		Yes
04/09/2010	\$55,107	2010R01518	No
11/01/2010	\$9,500	2010R05046	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-007-00 321 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JEFFREY ADAM

1082 E 1000 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,597** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-318-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 852.26	ESTIMATED			2024 Taxes: \$ 929.97
Legal Description KINCAID LT 26 BLK 53 95-1184 152677.000 66-179791 39.7X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,563	0	9,065	0	10,628		
	2024	1,540	0	10,057	0	11,597		

Land Fair Cash Val: 4,620 Building Fair Cash Val: 30,171 **Non-Farm Value: 34,791**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/18/2022	\$10,000	2022R01817	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-008-00 323 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ARTERBERRY MARY ANN

300 S EATON ST
EDINBURG IL 62531

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,523** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-318-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 578.18		ESTIMATED 2024 Taxes: \$ 603.27	
Legal Description KINCAID LT 27 & W1/2 LT 28 BLK 53 97-04364 152678.000 69-192266 59.55X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,347	0	12,863	0	15,210	
	2024	2,313	0	13,210	0	15,523	

Land Fair Cash Val: 6,939 Building Fair Cash Val: 39,630 **Non-Farm Value: 46,569**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2024	
OWNER OCCUPD	6000
Disabled Person	2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1997	\$25,000		Yes
07/11/2014	\$17,000	2014R02566	No
09/27/2016	\$36,000	2016R03595	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-009-00 327 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BAKER DONNA M &
JAMES RICHARD DODD

PO BOX 411
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,156** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-318-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 35.76	ESTIMATED			2024 Taxes: \$ 35.76
Legal Description KINCAID E1/2 LT 28 & ALL LT 29 BLK 53 152680.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
85-11876 59.55X125 12-10-F	2023	2,347	0	12,875	0	15,222		
	2024	2,313	0	15,843	0	18,156		

Land Fair Cash Val: 6,939 Building Fair Cash Val: 47,529 **Non-Farm Value: 54,468**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	3776
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	6710

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-010-00 329 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

STANDBERY LANCE D & SAMANTHA JETT
% CHAMPAIGN INVESTMENT LLC

2315 VENICE CT
CHAMPAIGN IL 61822

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,350** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-318-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 571.44	ESTIMATED			2024 Taxes: \$ 749.78
Legal Description KINCAID LT 30 BLK 53 2003R07360 152681.000 87-20893 39.7X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,563	0	11,563	0	13,126		
	2024	1,540	0	13,810	0	15,350		

Land Fair Cash Val: 4,620 Building Fair Cash Val: 41,430 **Non-Farm Value: 46,050**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/12/2017	\$32,000	2017R02142	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-011-00 328 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROCCARDO LINDA R

328 HICKORY ST
PO BOX 521
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,873** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-318-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 942.00	ESTIMATED			2024 Taxes: \$ 941.99
Legal Description KINCAID LT 1 BLK 53 152654.000 90-04726 39.7X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,563	0	26,428	0	27,991		
	2024	1,540	0	29,333	0	30,873		

Land Fair Cash Val: 4,620 Building Fair Cash Val: 87,999 **Non-Farm Value: 92,619**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	5244
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	8126

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-012-00 326 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COX JOHN

Address to send notice if different than shown at left:

326 HICKORY ST
KINCAID IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,766** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-318-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,869.56	ESTIMATED			2024 Taxes: \$ 2,386.94
Legal Description KINCAID LTS 2 & 3 BLK 53 152655.000 84-3826 79.4X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,129	0	20,185	0	23,314		
	2024	3,083	0	32,683	0	35,766		

Land Fair Cash Val: 9,249 Building Fair Cash Val: 98,049 **Non-Farm Value: 107,298**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	0
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/29/2023	\$89,500	2023R02759	No
08/23/2024	\$103,500	2024R02502	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-013-00 322 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCHULTE TRENT J

322 HICKORY ST
PO BOX 45
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,306** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-318-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 316.44	ESTIMATED			2024 Taxes: \$ 316.43
Legal Description KINCAID LTS 4 & 5 BLK 53 2000-01881 152657.000 2000-02563 79.4X125 12-10-F B206 P468	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,129	0	17,724	0	20,853		
	2024	3,083	0	19,223	0	22,306		

Land Fair Cash Val: 9,249 Building Fair Cash Val: 57,669 **Non-Farm Value: 66,918**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
	SEN FREEZE	3907
2024	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
	SEN FREEZE	5360

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-014-00 318 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WARREN GARY & KATHY

318 HICKORY ST
PO BOX 832
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,700** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: IMPROVEMENT ADDED, MAY QUALIFY FOR AN IMPROVEMENT EXEMPTION. CHECK WITH BOARD OF REVIEW.

Parcel Number 15-12-10-318-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID LTS 6 & 7 BLK 53 152659.000 97-04218 79.4X125 12-10-F 95-02303	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,129	0	25,073	0	28,202		
	2024	3,083	0	27,617	0	30,700		

Land Fair Cash Val: 9,249 Building Fair Cash Val: 82,851 **Non-Farm Value: 92,100**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled 70-100% Ve	20202
	IMPROVEMENT	2000
2024	OWNER OCCUPD	6000
	Disabled 70-100% Ve	22700
	IMPROVEMENT	2000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1996	\$42,600		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-015-00 314 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LAWYER NATHAN A

Address to send notice if different than shown at left:

PO BOX 374
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,273** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-318-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,051.52		ESTIMATED 2024 Taxes: \$ 1,705.89	
Legal Description KINCAID LTS 8 & 9 BLK 53 152661.000 2004R02591 79X125 12-10-F 2003R10250 2000R01464 1969-190269	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,129	0	28,454	0	31,583	
	2024	3,083	0	24,190	0	27,273	

Land Fair Cash Val: 9,249 Building Fair Cash Val: 72,570 **Non-Farm Value: 81,819**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/2000	\$37,000		Yes
07/19/2005	\$32,000	2005R04087	No
11/10/2016	\$25,000	2016R04255	Yes
10/22/2019	\$77,000	2019R03666	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-016-00 310 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREGORY MARC S & MELANIE S

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,665** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-318-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 558.28	ESTIMATED			2024 Taxes: \$ 1,737.32
Legal Description KINCAID LT 10 BLK 53 152663.000 39.7X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,563	0	16,399	0	17,962		
	2024	1,540	0	20,125	0	21,665		

Land Fair Cash Val: 4,620 Building Fair Cash Val: 60,375 **Non-Farm Value: 64,995**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023	
OWNER OCCUPD	6000
ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/17/2023	\$65,000	2023R00729	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-017-00 306 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MORRIS ROBERT & TAMMIE R

306 HICKORY ST
PO BOX 567
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,486** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-318-017-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,785.52	ESTIMATED			2024 Taxes: \$ 1,928.01
Legal Description KINCAID LOTS 11 & 12 BLK 53 2004R06235 1992R02041 79.4X125' 152665.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,129	0	25,137	0	28,266		
	2024	3,083	0	27,403	0	30,486		

Land Fair Cash Val: 9,249 Building Fair Cash Val: 82,209 **Non-Farm Value: 91,458**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD IMPROVEMENT	6000 443

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1992	\$19,500		Yes
08/28/2006	\$55,000	2006R04169	Yes
09/14/2009	\$74,000	2009R05279	Yes
05/01/2012	\$72,000	2012R02377	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-018-00 304 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOORE GORDON J

Address to send notice if different than shown at left:

PO BOX 846
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,550** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-318-018-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 502.24	ESTIMATED			2024 Taxes: \$ 685.63
Legal Description KINCAID LT 13 & E30 LT 14 BLK 53 MHRE 152666.000 69.7X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,747	0	9,516	0	12,263		
	2024	2,707	0	11,843	0	14,550		

Land Fair Cash Val: 8,121 Building Fair Cash Val: 35,529 **Non-Farm Value: 43,650**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/20/2015	\$31,000	2015R04498	No
03/22/2018	\$28,980	2018R00837	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-018-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-318-019-00 550 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DAVIS HOWARD & ELOISE

Address to send notice if different than shown at left:

807 SUMMIT AVE
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$15,210 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 5,820 Building Fair Cash Val: 39,810 Non-Farm Value: 45,630

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows 2023 and 2024 exemptions for OWNER OCCUPD at 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows sales from 07/01/1991 and 09/16/2024.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes handwritten initials Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-318-019-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-319-001-00 500 RAILROAD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GERMAN JAMES L

409 PRAIRIE ST
PO BOX 715
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,440** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-319-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,934.76		ESTIMATED	2024 Taxes: \$ 2,360.80	
Legal Description KINCAID LTS 7 8 & 9 BLK 59 152825.000 96-04408 120X125 12-10-F 76-8062	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,729	0	19,398	0	24,127		
	2024	4,660	0	24,780	0	29,440		

Land Fair Cash Val: 13,980 Building Fair Cash Val: 74,340 **Non-Farm Value: 88,320**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/17/2012	\$56,000	2012R04641	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-319-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-319-002-00 409 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JONES JACOB M & HEATHER N

409 WALNUT ST
PO BOX 25
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,250** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-319-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,573.02		ESTIMATED		2024 Taxes: \$ 1,944.61
Legal Description KINCAID LTS 4 5 & 6 BLK 59 152820.000 79-25599 120X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,729	0	20,887	0	25,616		
	2024	4,660	0	25,590	0	30,250		

Land Fair Cash Val: 13,980 Building Fair Cash Val: 76,770 **Non-Farm Value: 90,750**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/28/2011	\$59,000	2011R04919	No
06/22/2012	\$62,250	2012R03402	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-319-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-319-003-00 413 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILONCUS TABITHA L

PO BOX 882
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,803** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-319-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 238.50		ESTIMATED		2024 Taxes: \$ 946.48
Legal Description KINCAID LOT 3 BLK 59 1972R01576 45X110'AV 152818.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,658	0	18,852	0	20,510		
	2024	1,633	0	16,170	0	17,803		

Land Fair Cash Val: 4,899 Building Fair Cash Val: 48,510 **Non-Farm Value: 53,409**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	11536

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/16/2007	\$27,500	2007R02404	No
10/03/2007	\$51,000	2007R04822	No
11/14/2017	\$19,900	2017R04095	No
09/17/2020	\$50,000	2020R03588	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-319-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-319-004-00 415 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RHODES LISA J

Address to send notice if different than shown at left:

PO BOX 745
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,473** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-319-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 170.64	ESTIMATED			2024 Taxes: \$ 118.12
Legal Description KINCAID LT 2 BLK 59 152817.000 B157 P486 52X80AV 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,604	0	8,524	0	10,128		
	2024	1,580	0	7,893	0	9,473		

Land Fair Cash Val: 4,740 Building Fair Cash Val: 23,679 **Non-Farm Value: 28,419**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled Person	6000 2000
2024	OWNER OCCUPD Disabled Person	6000 2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/23/2009	\$25,000	2009R02377	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-319-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-319-005-00 417 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MICHEL ROBERT L & SHARON A

Address to send notice if different than shown at left:

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$12,384 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 6,051 Building Fair Cash Val: 31,101 Non-Farm Value: 37,152

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-319-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-319-006-00 419 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-319-006-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID E30 LT 1 BLK 59 152816.000 84-4800 12-10-F		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	11	0	0	0	11	
		2024	11	0	0	0	11	

Land Fair Cash Val: 33 Building Fair Cash Val: 0 Non-Farm Value: 33

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-319-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-319-007-00 431 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WOLFE MARK & APRIL

PO BOX 1054
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$50,436** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-319-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,035.10		ESTIMATED		2024 Taxes: \$ 4,044.47
Legal Description BG NW LN CENT AVE 139 SW S RY LN RN NW50 NE121 SE50 SW121 1974R14856 150113.000 B273 P475 50X121 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,608	0	11,300	0	12,908		
	2024	1,583	0	48,853	0	50,436		

Land Fair Cash Val: 4,749 Building Fair Cash Val: 146,559 **Non-Farm Value: 151,308**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/03/2022	\$30,000	2022R03618	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-319-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-319-008-00 427 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCCONNELL GARY & DEBBIE

Address to send notice if different than shown at left:

PO BOX 253
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,593** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-319-008-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 292.46	ESTIMATED			2024 Taxes: \$ 288.12
Legal Description 50X121 SW1/4 RR R/W INSURANCE OFFICE 1974R14856 50X121' 150102.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,928	0	1,719	0	3,647		
	2024	1,900	0	1,693	0	3,593		

Land Fair Cash Val: 5,700 Building Fair Cash Val: 5,079 **Non-Farm Value: 10,779**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-319-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-319-009-00 424 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SINKHORN JAMES & SAMANTHA J

Address to send notice if different than shown at left:

PO BOX 913
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,583** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-319-009-00	Class 0064	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 210.18	ESTIMATED			2024 Taxes: \$ 207.13
Legal Description KINCAID LT 22 BLK 59 152839.000 98-08459 68X119AV 12-10-F 92-04907	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,621	0	0	0	2,621		
	2024	2,583	0	0	0	2,583		

Land Fair Cash Val: 7,749 Building Fair Cash Val: 0 **Non-Farm Value: 7,749**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1992	\$6,500		Yes
06/30/2021	\$7,200	2021R02666	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-319-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-319-011-00 420 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SINKHORN JAMES I

420 HICKORY ST
PO BOX 913
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,923** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-319-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 762.62	ESTIMATED			2024 Taxes: \$ 762.61
Legal Description KINCAID LTS 20 & 21 BLK 59 1996R05407 152837.000 44X125AV & 40X125 12-10-F 1992R03956 1992R02737	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,310	0	22,376	0	25,686		
	2024	3,260	0	25,663	0	28,923		

Land Fair Cash Val: 9,780 Building Fair Cash Val: 76,989 **Non-Farm Value: 86,769**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	5176
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	8413

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1992	\$30,000		Yes
02/06/2006	\$40,000	2006R00569	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-319-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-319-013-00 416 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PINKLEY GARY L & FERN E

PO BOX 1144
416 HICKORY ST
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$36,663** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-319-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED 2024 Taxes: \$ 1,396.67		
Legal Description KINCAID LOTS 17 18 & 19 BLK 59 BK21 PG552 BK142 PG116 120X125' 152835.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,729	0	17,442	0	22,171	
	2024	4,660	0	32,003	0	36,663	

Land Fair Cash Val: 13,980 Building Fair Cash Val: 96,009 **Non-Farm Value: 109,989**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled 70-100% Ve	6000 16171
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/30/2022	\$84,000	2022R02433	Yes
03/14/2024	\$110,000	2024R00679	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-319-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-319-014-00 412 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HARWOOD JASON L & AMY J RODDEN

412 HICKORY ST
PO BOX 925
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$14,424 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 9,321 Building Fair Cash Val: 33,951 Non-Farm Value: 43,272

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount. Rows for Tax Year 2023 and 2024, both showing OWNER OCCUPD with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Rows for 10/01/1999 and 06/01/2005.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-319-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-319-015-00 408 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FANK KELLY M

408 HICKORY ST
PO BOX 1023
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,230** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-319-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,503.50		ESTIMATED		2024 Taxes: \$ 1,461.87
Legal Description KINCAID E1/2 LT 13 & ALL LT 14 BLK 59 152831.000 2002-07913 60X125 12-10-F 2000-05283 2002-05150 72-4139	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,362	0	22,387	0	24,749		
	2024	2,330	0	21,900	0	24,230		

Land Fair Cash Val: 6,990 Building Fair Cash Val: 65,700 **Non-Farm Value: 72,690**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2000	\$70,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-319-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-319-016-00 404 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GATTON WILLIAM

PO BOX 504
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,227** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-319-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 550.68		ESTIMATED	2024 Taxes: \$ 579.53
Legal Description KINCAID LT 12 & W1/2 LT 13 BLK 59 152828.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
2004R00346 60X125 12-10-F	2023	2,362	0	10,505	0	12,867	
1996R05149 1997R01591	2024	2,330	0	10,897	0	13,227	

Land Fair Cash Val: 6,990 Building Fair Cash Val: 32,691 **Non-Farm Value: 39,681**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1996	\$20,160		Yes
03/05/2014	\$25,000	2014R00731	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-319-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-319-017-00 400 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

NATION MICHAEL & ROSEMARY

400 HICKORY ST
PO BOX 1006
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$24,143 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 9,549 Building Fair Cash Val: 62,880 Non-Farm Value: 72,429

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Lists exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows a sale on 10/01/1994 for \$25,000.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-319-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-320-001-00 301 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURVEY BERNARD A & JANE E (LSR)
FOR TERRY ADAMS (LSE)

PO BOX 677
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,433** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-320-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 475.46	ESTIMATED			2024 Taxes: \$ 756.43
Legal Description KINCAID LT 16 & W1/2 LT 17 BLK 54 152697.000 2004R05519 59.23X125 12-10-F 92-03076	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,334	0	9,595	0	11,929		
	2024	2,300	0	13,133	0	15,433		

Land Fair Cash Val: 6,900 Building Fair Cash Val: 39,399 **Non-Farm Value: 46,299**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000
2024	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2004	\$20,000		Yes
08/02/2005	\$14,700	2005R04356	Yes
07/30/2007	\$12,000	2007R03733	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-320-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-320-002-00 305 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURVEY BERNARD A & JANE E (LSR)
FOR MADISON DECKER (LSE)

PO BOX 677
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,073** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-320-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 333.68	ESTIMATED			2024 Taxes: \$ 349.07
Legal Description KINCAID E1/2 LT 17 & ALL LTS 18 & 19 BLK 54 152700.000 B214 P573 99.25X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,901	0	6,260	0	10,161		
	2024	3,843	0	13,230	0	17,073		

Land Fair Cash Val: 11,529 Building Fair Cash Val: 39,690 **Non-Farm Value: 51,219**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000
2024	Leasehold Owner IMPROVEMENT	6000 6720

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/30/2015	\$24,000	2015R02517	Yes
06/01/2016	\$16,500	2016R01941	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-320-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-320-004-00 311 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WEBER JARED B &
HANNAH GRANDT

1921 E PINE ST
SPRINGFIELD IL 62703

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,916** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-320-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 569.44	ESTIMATED			2024 Taxes: \$ 554.60
Legal Description KINCAID LT 20 & 21 BLK 54 MHRE 152703.000 2004R05135 79.4X125 12-10-F 2004R05134	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,129	0	3,972	0	7,101		
	2024	3,083	0	3,833	0	6,916		

Land Fair Cash Val: 9,249 Building Fair Cash Val: 11,499 **Non-Farm Value: 20,748**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/07/2005	\$16,000	2005R03233	No
09/25/2023	\$1,500	2023R02707	Yes
10/16/2023	\$4,000	2023R02955	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-320-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-320-005-00 313 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FANK MORGAN LEIGH

Address to send notice if different than shown at left:

PO BOX 1023
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,331** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-320-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 71.86		ESTIMATED	2024 Taxes: \$ 71.85
Legal Description KINCAID LT 22 BLK 54 152704.000 80-30844 39.7X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,563	0	17,262	0	18,825	
	2024	1,540	0	27,791	0	29,331	

Land Fair Cash Val: 4,620 Building Fair Cash Val: 83,373 **Non-Farm Value: 87,993**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	6929
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	17435

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/14/2024	\$88,000	2024R02410	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-320-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-320-006-00 317 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GIBSON DANNIE W

317 HICKORY ST
PO BOX 884
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,577** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-320-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID LTS 23 24 & 25 BLK 54 152706.000 72-2506 119X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,688	0	21,913	0	26,601		
	2024	4,620	0	25,957	0	30,577		

Land Fair Cash Val: 13,860 Building Fair Cash Val: 77,871 **Non-Farm Value: 91,731**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled 70-100% Ve	9457
	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	6144
2024	Disabled 70-100% Ve	9457
	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	10120

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-320-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-320-007-00 321 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PRINCE HAYDEN D

Address to send notice if different than shown at left:

PO BOX 208
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,664** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-320-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,614.96		ESTIMATED	2024 Taxes: \$ 1,977.81	
Legal Description KINCAID LTS 26 & 27 BLK 54 152708.000 79.4X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,129	0	17,010	0	20,139		
	2024	3,083	0	27,581	0	30,664		

Land Fair Cash Val: 9,249 Building Fair Cash Val: 82,743 **Non-Farm Value: 91,992**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	0
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/29/2023	\$92,000	2023R02761	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-320-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-320-008-00 325 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MERANO LORI & DENISE

325 HICKORY ST
PO BOX 304
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,960** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-320-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,953.92		ESTIMATED	2024 Taxes: \$ 2,001.55	
Legal Description KINCAID LTS 28 & 29 BLK 54 2000-00440 152710.000 79.4X125 12-10-F		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	3,129	0	27,237	0	30,366	
		2024	3,083	0	27,877	0	30,960	

Land Fair Cash Val: 9,249 Building Fair Cash Val: 83,631 **Non-Farm Value: 92,880**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-320-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-320-009-00 625 RAILROAD AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BEACH LARRY G & MARY E

625 RAILROAD AVE
PO BOX 376
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,583** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-320-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 425.42	ESTIMATED			2024 Taxes: \$ 608.08
Legal Description KINCAID LT 30 BLK 54 152712.000 93-04834 39.7X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,563	0	14,742	0	16,305		
	2024	1,540	0	17,043	0	18,583		

Land Fair Cash Val: 4,620 Building Fair Cash Val: 51,129 **Non-Farm Value: 55,749**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1990	\$8,927		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-320-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-320-010-00 326 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOOMEY DONALD W & BRIDGET L

Address to send notice if different than shown at left:

PO BOX 225
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,434** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-320-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 205.62		ESTIMATED	2024 Taxes: \$ 275.37	
Legal Description KINCAID LTS 1 & 2 BLK 54 152683.000 86-14085 79.4X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,039	0	525	0	2,564		
	2024	2,917	0	517	0	3,434		

Land Fair Cash Val: 8,751 Building Fair Cash Val: 1,551 **Non-Farm Value: 10,302**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/29/2021	\$10,000	2021R01255	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-320-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-320-011-00 322 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BEEMEN TANYA

322 CEDAR ST
PO BOX 941
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,753** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-320-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 227.66	ESTIMATED			2024 Taxes: \$ 300.95
Legal Description KINCAID LOTS 3 & 4 BLK 54 CFD 2000 1997R02684 79.4X125' 152685.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,129	0	5,710	0	8,839		
	2024	3,083	0	6,670	0	9,753		

Land Fair Cash Val: 9,249 Building Fair Cash Val: 20,010 **Non-Farm Value: 29,259**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1997	\$15,000		Yes
11/23/2005	\$24,000	2005R06629	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-320-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-320-012-00 318 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRANDON KATHRYN J & DANNY L

318 CEDAR ST
PO BOX 21
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,536** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-320-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 173.62	ESTIMATED			2024 Taxes: \$ 173.61
Legal Description KINCAID LTS 5 & 6 BLK 54 MHRE 152687.000 2003R04036QC79.4X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,129	0	12,653	0	15,782		
	2024	3,083	0	14,453	0	17,536		

Land Fair Cash Val: 9,249 Building Fair Cash Val: 43,359 Non-Farm Value: 52,608

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	2617
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	4371

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-320-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-320-014-00 314 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PARKER LISA V

Address to send notice if different than shown at left:

PO BOX 652
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,370** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-320-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,413.48		ESTIMATED		2024 Taxes: \$ 2,595.76
Legal Description KINCAID LTS 7 & 8 BLK 54 152689.000 1997R01706 78.7X125 12-10-F 1996R01808 1978R02222	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,101	0	32,996	0	36,097		
	2024	3,057	0	35,313	0	38,370		

Land Fair Cash Val: 9,171 Building Fair Cash Val: 105,939 **Non-Farm Value: 115,110**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/08/2015	\$87,000	2015R02235	Yes
01/16/2020	\$88,000	2020R00212	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-320-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-320-015-00 310 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JONES JENNIFER A

310 CEDAR ST
PO BOX 674
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,653** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-10-320-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 937.50	ESTIMATED			2024 Taxes: \$ 1,006.07
Legal Description KINCAID LTS 9 10 & 11 BLK 54 152691.000 2004R04079 119X125 12-10-F 2003R09868 BK201 PG88	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,688	0	13,003	0	17,691		
	2024	4,620	0	20,033	0	24,653		

Land Fair Cash Val: 13,860 Building Fair Cash Val: 60,099 **Non-Farm Value: 73,959**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD IMPROVEMENT	6000 6107

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2004	\$25,000		Yes
01/02/2008	\$35,000	2008R00019	No
04/03/2015	\$33,000	2015R01254	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-320-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-320-016-00 306 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

FRANKLIN TREVOR J & EMILY F

Address to send notice if different than shown at left:

1279 W WANTLAND DR
TAYLORVILLE IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$4,096 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 9,249 Building Fair Cash Val: 3,039 Non-Farm Value: 12,288

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes entry for 11/23/2005.

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-320-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-320-017-00 650 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BASIL JEFFREY W & GINA L

Address to send notice if different than shown at left:

PO BOX 135
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,710** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-320-017-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,050.42	ESTIMATED			2024 Taxes: \$ 1,019.22
Legal Description KINCAID LTS 14 & 15 BLK 54 152694.000 98-05213 79.25X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,122	0	9,977	0	13,099		
	2024	3,077	0	9,633	0	12,710		

Land Fair Cash Val: 9,231 Building Fair Cash Val: 28,899 **Non-Farm Value: 38,130**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/04/2006	\$8,500	2006R04930	Yes
05/01/2017	\$3,750	2017R01579	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-320-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-321-001-00 620 RAILROAD AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CASAD ROBERT ERIK

620 RAILROAD AVE
PO BOX
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,664** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-321-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,967.40		ESTIMATED	2024 Taxes: \$ 2,138.19	
Legal Description KINCAID LT 15 BLK 60 2003R03249 152855.000 40X125 12-10-F 2002-06404 PLAT OF SURVEY	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,714	0	28,820	0	30,534		
	2024	1,687	0	30,977	0	32,664		

Land Fair Cash Val: 5,061 Building Fair Cash Val: 92,931 **Non-Farm Value: 97,992**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2003	\$7,000		Yes
09/29/2020	\$75,000	2020R03773	Yes
05/07/2024	\$98,000	2024R01270	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-321-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-321-002-00 403 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NEVILLE PAUL R

Address to send notice if different than shown at left:

PO BOX 702
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,394** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-321-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 202.88	ESTIMATED			2024 Taxes: \$ 596.29
Legal Description KINCAID LTS 16 & 17 BLK 60 152856.000 91-05507 80X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	11,962	0	15,112		
	2024	3,107	0	19,287	0	22,394		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 57,861 **Non-Farm Value: 67,182**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	IMPROVEMENT	4582
2024	OWNER OCCUPD	6000
	Disabled Person	2000
	IMPROVEMENT	6958

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-321-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-321-003-00 407 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GLOVER MICHAEL B & TANYA

Address to send notice if different than shown at left:

PO BOX 843
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,683** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-321-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,343.36		ESTIMATED		2024 Taxes: \$ 1,498.19
Legal Description KINCAID LT 18 BLK 60 152858.000 2001-02828 40X125 12-10-F 92-1391 98-04826	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	15,177	0	16,752		
	2024	1,553	0	17,130	0	18,683		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 51,390 **Non-Farm Value: 56,049**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2001	\$39,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-321-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-321-004-00 411 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WISE PRECILLA F

411 HICKORY ST
PO BOX 722
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,594** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-321-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 808.96	ESTIMATED			2024 Taxes: \$ 929.73
Legal Description KINCAID LOTS 20 & 21 BLK 60 152860.000 2001-07856 80X125 12-10-F 92-1391 98-04826 98-02569	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	12,938	0	16,088		
	2024	3,107	0	14,487	0	17,594		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 43,461 **Non-Farm Value: 52,782**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/2001	\$35,000		Yes
04/13/2007	\$40,000	2007R01803	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-321-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-321-004-01

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

LANCASTER PREN C & DENA A

Address to send notice if different than shown at left:

PO BOX 874
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$7,680 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 4,659 Building Fair Cash Val: 18,381 Non-Farm Value: 23,040

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-321-004-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-321-005-00 415 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GERMAN JAMES LARUE

Address to send notice if different than shown at left:

PO BOX 715
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,104** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-321-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 550.92		ESTIMATED	2024 Taxes: \$ 569.67
Legal Description KINCAID LTS 22 & 23 BLK 60 152862.000 80-33513 80X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,150	0	3,720	0	6,870	
	2024	3,107	0	3,997	0	7,104	

Land Fair Cash Val: 9,321 Building Fair Cash Val: 11,991 **Non-Farm Value: 21,312**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-321-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-321-006-00 419 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILLS MIKE

Address to send notice if different than shown at left:

PO BOX 814
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,890** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-321-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,849.68	ESTIMATED			2024 Taxes: \$ 2,554.30
Legal Description KINCAID LOTS 24 & 25 BLK 60 94-01222 152864.000 94-01223 86X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	27,491	0	29,066		
	2024	1,553	0	37,337	0	38,890		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 112,011 **Non-Farm Value: 116,670**

****Required**** Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD IMPROVEMENT	6000 1037

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/1994	\$22,400		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-321-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-321-008-00 423 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

THEISON DOMENIC

29747 LARIMORE LN
MACKINAW IL 61755

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,547** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-321-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,676.86		ESTIMATED	2024 Taxes: \$ 1,808.05	
Legal Description KINCAID LT 26 BLK 60 152866.000 82-42183 50X150 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,944	0	18,967	0	20,911		
	2024	1,917	0	20,630	0	22,547		

Land Fair Cash Val: 5,751 Building Fair Cash Val: 61,890 **Non-Farm Value: 67,641**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-321-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-321-009-00 425 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HECHINGER GINA

Address to send notice if different than shown at left:

104 S BONE DR
NORMAL IL 61761

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,057** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-321-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,322.02	ESTIMATED			2024 Taxes: \$ 1,528.18
Legal Description KINCAID LT 27 BLK 60 152867.000 90-05205 66X80AV 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,722	0	14,764	0	16,486		
	2024	1,700	0	17,357	0	19,057		

Land Fair Cash Val: 5,100 Building Fair Cash Val: 52,071 **Non-Farm Value: 57,171**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-321-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-321-010-00 424 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BECHELLI DONA TRUSTEE

620 RIDGE
PO BOX 352
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$277** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-321-010-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 22.21
Legal Description KINCAID LTS 1 & 2 BLK 60 EX HWY & PRT VAC CEDAR & CENTRAL AVE 152840.000 84-4800 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	11	0	0	0	11	
	2024	277	0	0	0	277	

Land Fair Cash Val: 831 Building Fair Cash Val: 0 Non-Farm Value: 831

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-321-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-321-011-00 500 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BECHELLI DONA J

Address to send notice if different than shown at left:

PO BOX 352
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,690** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-321-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,012.70	ESTIMATED			2024 Taxes: \$ 2,300.66
Legal Description KINCAID LT 3 BLK 60 EX PRT FOR PUB HWY 152842.001 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,714	0	23,385	0	25,099		
	2024	1,687	0	27,003	0	28,690		

Land Fair Cash Val: 5,061 Building Fair Cash Val: 81,009 **Non-Farm Value: 86,070**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-321-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-321-012-00 418 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

GERMAN JAMES L

Address to send notice if different than shown at left:

PO BOX 715
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$6,223 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 6,459 Building Fair Cash Val: 12,210 Non-Farm Value: 18,669

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-321-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-321-013-00 414 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DOUGHERTY ANDREW D & SHIRLENE J

414 CEDAR ST
PO BOX 448
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,430** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-321-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,409.66	ESTIMATED			2024 Taxes: \$ 1,638.29
Legal Description KINCAID W1/2 LT 6 & ALL LOTS 7 8 & 9 BLK 60 152847.000 87-20771 140X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,517	0	23,273	0	28,790		
	2024	5,437	0	25,993	0	31,430		

Land Fair Cash Val: 16,311 Building Fair Cash Val: 77,979 **Non-Farm Value: 94,290**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	IMPROVEMENT	211
2024	OWNER OCCUPD	6000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-321-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-321-016-00 404 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L II & BRIDGET L MOOMEY

Address to send notice if different than shown at left:

PO BOX 55
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,150** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-321-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 999.10	ESTIMATED			2024 Taxes: \$ 1,776.21
Legal Description KINCAID LTS 10 11 & 12 BLK 60 152852.000 90-05564 120X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,729	0	13,730	0	18,459		
	2024	4,660	0	17,490	0	22,150		

Land Fair Cash Val: 13,980 Building Fair Cash Val: 52,470 **Non-Farm Value: 66,450**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2018	\$45,000	2018R03265	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-321-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-321-017-00 400 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOOMEY DONALD W & BRIDGET L
% BRIAN BERTOLDO

PO BOX 55
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$70,800** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-321-017-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 4,537.40		ESTIMATED		2024 Taxes: \$ 5,196.32
Legal Description KINCAID LOTS 13 & 14 BLK 60 2002R01480 1993R05834 BK196 PG41 80X125' 152854.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	59,433	0	62,583		
	2024	3,107	0	67,693	0	70,800		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 203,079 **Non-Farm Value: 212,400**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1993	\$20,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-321-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-322-001-00 301 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BASIL CHARLENE & CHESTER &
JEFFREY BASIL & ANITA LEMANSKI

PO BOX 16
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,437** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-322-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 201.28	ESTIMATED			2024 Taxes: \$ 201.28
Legal Description KINCAID LTS 16 & 17 BLK 55 152724.000 94-1080 79.3X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,125	0	25,543	0	28,668		
	2024	3,080	0	28,357	0	31,437		

Land Fair Cash Val: 9,240 Building Fair Cash Val: 85,071 **Non-Farm Value: 94,311**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	15158
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	17927

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-322-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-322-002-00 305 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GATTON RODNEY E SR

Address to send notice if different than shown at left:

PO BOX 704
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,906** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-322-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,205.50		ESTIMATED		2024 Taxes: \$ 1,275.51
Legal Description KINCAID LTS 18 & 19 BLK 55 2000-00820-21 152726.000 87-21830 79.4X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,129	0	18,148	0	21,277		
	2024	3,083	0	18,823	0	21,906		

Land Fair Cash Val: 9,249 Building Fair Cash Val: 56,469 **Non-Farm Value: 65,718**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
Tax Year 2023 IMPROVEMENT	244

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/1999	\$40,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-322-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-322-003-00 309 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MATHON DONALD J

Address to send notice if different than shown at left:

509 E STEVENSON ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,270** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-322-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,201.26	ESTIMATED			2024 Taxes: \$ 1,384.88
Legal Description KINCAID LT 20 BLK 55 15 2004R04611 39.7X125 12-10-F 2003R02075 2003R06989 199902092 1999R02600	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,563	0	13,417	0	14,980		
	2024	1,540	0	15,730	0	17,270		

Land Fair Cash Val: 4,620 Building Fair Cash Val: 47,190 **Non-Farm Value: 51,810**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2004	\$26,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-322-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-322-004-00 313 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HENDRIX CHRISTOPHER S

313 CEDAR ST
PO BOX 281
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,107** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-322-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,246.00	ESTIMATED			2024 Taxes: \$ 1,452.00
Legal Description KINCAID LTS 21 22 & 23 BLK 55 152730.000 2000R01187 119X125 12-10-F 97-00707 93-2683 96-4285 97-00706	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,688	0	16,850	0	21,538		
	2024	4,620	0	19,487	0	24,107		

Land Fair Cash Val: 13,860 Building Fair Cash Val: 58,461 **Non-Farm Value: 72,321**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/27/2014	\$13,000	2014R01901	Yes
08/05/2015	\$66,000	2015R03060	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-322-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-322-005-00 317 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PRINCE JENNIFER R

PO BOX 242
317 CEDAR ST
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,573** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-322-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,201.82		ESTIMATED		2024 Taxes: \$ 1,569.56
Legal Description KINCAID LTS 24 & 25 BLK 55 152732.000 2004R07424 79.4X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,129	0	11,858	0	14,987		
	2024	3,083	0	16,490	0	19,573		

Land Fair Cash Val: 9,249 Building Fair Cash Val: 49,470 **Non-Farm Value: 58,719**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
11/01/2004	\$47,000	2004R07424	No
06/02/2010	\$49,000	2010R02296	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-322-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-322-006-00 321 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LOCK STEPHANIE

Address to send notice if different than shown at left:

PO BOX 497
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,332** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-10-322-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,143.36	ESTIMATED			2024 Taxes: \$ 913.29
Legal Description KINCAID LTS 26 & 27 BLK 55 152734.000 B264 P16 79.4X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,129	0	17,129	0	20,258		
	2024	3,083	0	15,249	0	18,332		

Land Fair Cash Val: 9,249 Building Fair Cash Val: 45,747 **Non-Farm Value: 54,996**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD IMPROVEMENT	6000 943

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/29/2009	\$51,000	2009R04451	Yes
10/24/2022	\$55,000	2022R03908	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-322-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-322-007-00 325 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROWN JACK A

Address to send notice if different than shown at left:

PO BOX 921
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,493** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-322-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 950.66	ESTIMATED			2024 Taxes: \$ 991.31
Legal Description KINCAID LTS 28 & 29 BLK 55 152736.000 2002-01479 79.4X125 12-10-F 98-04051 96-05409 82-41060	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,129	0	14,726	0	17,855		
	2024	3,083	0	29,410	0	32,493		

Land Fair Cash Val: 9,249 Building Fair Cash Val: 88,230 **Non-Farm Value: 97,479**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD IMPROVEMENT	6000 14131

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1998	\$20,000		Yes
11/21/2016	\$23,000	2016R04388	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-322-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-322-008-00 329 RAILROAD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WILSON TAMMY S & GEORGE

Address to send notice if different than shown at left:

PO BOX 136
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,733** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-322-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 699.34	ESTIMATED			2024 Taxes: \$ 780.49
Legal Description KINCAID LT 30 BLK 55 152738.000 82-39813 39.7X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,563	0	13,158	0	14,721		
	2024	1,540	0	14,193	0	15,733		

Land Fair Cash Val: 4,620 Building Fair Cash Val: 42,579 **Non-Farm Value: 47,199**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-322-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-322-009-00 326 WILLOW ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BECK JOYCE A

Address to send notice if different than shown at left:

505 N SILVER ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,663** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-322-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,118.66	ESTIMATED			2024 Taxes: \$ 1,095.64
Legal Description KINCAID LTS 1 & 2 BLK 55 152714.000 2003R08557 79.4X125 12-10-F 89-8064	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,129	0	10,821	0	13,950		
	2024	3,083	0	10,580	0	13,663		

Land Fair Cash Val: 9,249 Building Fair Cash Val: 31,740 **Non-Farm Value: 40,989**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1989	\$19,000		Yes
04/26/2007	\$36,000	2007R02057	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-322-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-322-010-00 322 WILLOW ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOBBS JARED R & KRISTA A

322 WILLOW ST
PO BOX 983
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$44,733** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-322-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,154.80	ESTIMATED			2024 Taxes: \$ 3,023.97
Legal Description KINCAID LTS 3 4 & 5 BLK 55 152716.000 2004R05422 119X125 12-10-F 1997R04589 1994R00800	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,688	0	34,443	0	39,131		
	2024	4,620	0	40,113	0	44,733		

Land Fair Cash Val: 13,860 Building Fair Cash Val: 120,339 **Non-Farm Value: 134,199**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	IMPROVEMENT	5237
	IMPROVEMENT	1023
2024	OWNER OCCUPD	6000
	IMPROVEMENT	1023

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1997	\$33,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-322-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-322-011-00 314 WILLOW ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARCY BLAIR K

314 WILLOW ST
PO BOX 221
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,331** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-322-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,493.86	ESTIMATED			2024 Taxes: \$ 1,047.68
Legal Description KINCAID LTS 6 7 8 & 9 BLK 55 152718.000 94-01476 158.8X125 12-10-F 2000-03839 PLAT OF SURVEY	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,255	0	27,640	0	33,895		
	2024	6,167	0	22,164	0	28,331		

Land Fair Cash Val: 18,501 Building Fair Cash Val: 66,492 **Non-Farm Value: 84,993**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 9266
2024	OWNER OCCUPD IMPROVEMENT	6000 9266

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/13/2021	\$85,000	2021R04365	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-322-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-322-012-00 310 WILLOW ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

COOK GREGORY C & KARSHIA

Address to send notice if different than shown at left:

1957 N 700 EAST RD
EDINBURG IL 62531

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$30,340 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for Year, Homesite/Lots, Farm Land, Buildings, Farm Bldgs, and Total.

Land Fair Cash Val: 18,501 Building Fair Cash Val: 72,519 Non-Farm Value: 91,020

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Includes one row of data)

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-322-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-322-012-01 750 COMMONWEALTH AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BASIL JEFFREY W & GINA L

750 COMMONWEALTH AVE
PO BOX 135
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$52,004 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 11,391 Building Fair Cash Val: 144,621 Non-Farm Value: 156,012

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount. Rows for Tax Year 2023 and 2024, both showing OWNER OCCUPD with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-322-012-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-323-001-00 303 WILLOW ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEROZZO ROBERT

303 WILLOW ST
PO BOX 1125
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,553** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-323-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,259.52		ESTIMATED	2024 Taxes: \$ 2,369.86	
Legal Description KINCAID LTS 16 17 18 19 BLK 56 152741.000 159X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,263	0	32,914	0	39,177		
	2024	6,173	0	34,380	0	40,553		

Land Fair Cash Val: 18,519 Building Fair Cash Val: 103,140 **Non-Farm Value: 121,659**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-323-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-323-002-00 309 WILLOW ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOBBS STEPHEN R & SHEILA D

Address to send notice if different than shown at left:

309 WILLOW ST
KINCAID IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,640** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-323-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,084.62		ESTIMATED		2024 Taxes: \$ 2,056.08
Legal Description KINCAID LOTS 20 21 22 23 & 24 BLK 56 MHRE 2005R06469 1994R02285 1991R01520 198.5X125' 152740.000 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,823	0	24,173	0	31,996		
	2024	7,707	0	23,933	0	31,640		

Land Fair Cash Val: 23,121 Building Fair Cash Val: 71,799 **Non-Farm Value: 94,920**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2016	\$75,000	2016R03220	Yes
09/20/2019	\$78,000	2019R03218	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-323-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-323-004-00 319 WILLOW ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MERANO GINA & FRANK STEVEN

319 WILLOW ST
PO BOX 478
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$70,173** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-323-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 5,000.66		ESTIMATED	2024 Taxes: \$ 5,146.05
Legal Description KINCAID LTS 25 26 & 27 BLK 56 152749.000 94-1465 119X125 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,688	0	63,672	0	68,360	
	2024	4,620	0	65,553	0	70,173	

Land Fair Cash Val: 13,860 Building Fair Cash Val: 196,659 **Non-Farm Value: 210,519**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-323-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-323-005-00 327 WILLOW ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SWEDICK WILLIAM L & MICKEY L

Address to send notice if different than shown at left:

PO BOX 17
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$30,460 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: IMPROVEMENT ADDED, MAY QUALIFY FOR AN IMPROVEMENT EXEMPTION. CHECK WITH BOARD OF REVIEW.

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 13,860 Building Fair Cash Val: 77,520 Non-Farm Value: 91,380

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Exemption History, Amount, Tax Year. Rows for 2023 and 2024 with categories like ELDERLY, OWNER OCCUPD, IMPROVEMENT.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Row: 02/06/2007, \$54,000, 2007R00579, Yes.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-323-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-323-006-00 300 SPRUCE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEROZZO JOHN
% JOHN WAYNE PEROZZO

PO BOX 463
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,340** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-323-006-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,149.94	ESTIMATED			2024 Taxes: \$ 1,149.93
Legal Description KINCAID LTS 1 THRU 15 BLK 56 152739.000 595X124 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	14,340	0	0	0	14,340		
	2024	14,340	0	0	0	14,340		

Land Fair Cash Val: 43,020 Building Fair Cash Val: 0 **Non-Farm Value: 43,020**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-323-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-324-001-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF KINCAID (LSR)
AMERICAN LEGION (LSE)

PO BOX 371
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$58,457** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-324-001-00	Class 0060	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,309.24		ESTIMATED		2024 Taxes: \$ 1,434.90
Legal Description IMPROVEMENTS ONLY ON VILLAGE OF KINCAID LAND PRT SE SE SW 150119.002 12-10-F	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,662	0	55,092	0	56,754		
	2024	1,712	0	56,745	0	58,457		

Land Fair Cash Val: 5,136 Building Fair Cash Val: 170,235 **Non-Farm Value: 175,371**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Fraternal org.	39010
2024	Fraternal org.	39010

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-324-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-325-001-00 101 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RULE AUSTIN & CELINE

101 WALNUT ST
PO BOX 1146
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$54,328** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-325-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,685.18	ESTIMATED			2024 Taxes: \$ 3,875.43
Legal Description MICHELS SUBDIV PLAT 1 LOT 1 97-05097 2003R07554 97-07033 116X124.93 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,910	0	34,575	0	39,485		
	2024	4,837	0	49,491	0	54,328		

Land Fair Cash Val: 14,511 Building Fair Cash Val: 148,473 **Non-Farm Value: 162,984**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/1997	\$79,000		Yes
12/04/2020	\$122,500	2020R04864	Yes
12/19/2022	\$163,000	2022R04528	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-325-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-325-002-00 105 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TAYLOR VIRGINIA (LSE)
% JACK D & TERRY D TAYLOR (LSR)

111 TRILLIUM LN
SPRINGFIELD IL 62707

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$44,924** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-325-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,022.44	ESTIMATED			2024 Taxes: \$ 1,022.43
Legal Description MICHELS SUBDIV PLAT 1 LOT 2 98-03784 98-04054 97-07036 115X124.93 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,910	0	33,615	0	38,525		
	2024	4,837	0	40,087	0	44,924		

Land Fair Cash Val: 14,511 Building Fair Cash Val: 120,261 **Non-Farm Value: 134,772**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	SEN FREEZE	14775
	Leasehold Owner	6000
2024	ELDERLY	5000
	SEN FREEZE	21174
	Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1998	\$75,810		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-325-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-325-003-00 115 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

OLLER DAVID B & JAMIE L

115 WALNUT ST
PO BOX 252
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$62,164 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 14,511 Building Fair Cash Val: 171,981 Non-Farm Value: 186,492

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History

Amount

Tax Year 2023

OWNER OCCUPD 6000
IMPROVEMENT 13866
IMPROVEMENT 2565
Disabled Person 2000

Tax Year 2024

OWNER OCCUPD 6000
IMPROVEMENT 2565
Disabled Person 2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History

Date Sold Sale Price Doc# Qualified?
11/01/1998 \$72,000 Yes

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-325-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-325-004-00 121 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TAYLOR CINDY J

121 WALNUT ST
PO BOX 857
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,904** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-325-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,710.78	ESTIMATED			2024 Taxes: \$ 2,798.96
Legal Description MICHELS SUBDIV PLAT 1 LOT 4 99-03899 98-06041 97-05817 115X124.93 12-10-E MINE SUB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,910	0	29,992	0	34,902		
	2024	4,837	0	36,067	0	40,904		

Land Fair Cash Val: 14,511 Building Fair Cash Val: 108,201 **Non-Farm Value: 122,712**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 7568
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1999	\$70,000		Yes
03/08/2012	\$65,000	2012R01267	Yes
07/26/2012	\$66,200	2012R04175	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-325-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-325-005-00 125 WALNUT ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JARRETT VICKY M & WILLIAM L

125 WALNUT ST
PO BOX 922
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$44,630** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-325-005-00	Class 0540	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 553.64	ESTIMATED			2024 Taxes: \$ 1,792.57
Legal Description MICHELS SUBDIV PLAT 1 LOT 5 2001-05779 117X124.93 99-05559 99-05642 12-10-E 98-07220 99-03254 MINE SUBSIDENCE	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,993	0	33,275	0	38,268		
	2024	4,920	0	39,710	0	44,630		

Land Fair Cash Val: 14,760 Building Fair Cash Val: 119,130 **Non-Farm Value: 133,890**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	4914
	IMPROVEMENT	15450
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	11276

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-325-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-325-006-00 130 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

KING DAVID JAMES

Address to send notice if different than shown at left:

PO BOX 982
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$47,197 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 10,851 Building Fair Cash Val: 130,740 Non-Farm Value: 141,591

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows 2023 and 2024 entries for OWNER OCCUPD with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows a sale on 09/01/2003 for \$92,000, qualified Yes.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes handwritten initials Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-325-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-325-007-00 126 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SCHMID LINUS D & DANA L

126 HICKORY ST
PO BOX 213
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$43,054 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 14,511 Building Fair Cash Val: 114,651 Non-Farm Value: 129,162

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Lists exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Lists sales history from 2001 to 2019.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-325-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-325-008-00 124 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RIGGS MATTHEW W & TRACIE L

124 HICKORY ST
PO BOX 320
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$49,797** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-325-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,109.14	ESTIMATED			2024 Taxes: \$ 3,512.09
Legal Description MICHELS SUBDIV PLAT 1 LOT 8 2001-07659 115X124.93 12-10-E 2000-03294	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,910	0	39,862	0	44,772		
	2024	4,837	0	44,960	0	49,797		

Land Fair Cash Val: 14,511 Building Fair Cash Val: 134,880 **Non-Farm Value: 149,391**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-325-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-325-009-00 110 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BURNEY JARROD T & TAMERA K

110 HICKORY ST
PO BOX 532
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$53,520** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-325-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,365.66		ESTIMATED	2024 Taxes: \$ 3,810.64	
Legal Description MICHELS SUBDIV PLAT 1 LOT 9 2000-01418 115X124.93 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,951	0	43,020	0	47,971		
	2024	4,880	0	48,640	0	53,520		

Land Fair Cash Val: 14,640 Building Fair Cash Val: 145,920 **Non-Farm Value: 160,560**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-325-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-325-010-00 100 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MORETZ SHARON L

Address to send notice if different than shown at left:

PO BOX 1126
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$46,847** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-325-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,620.08	ESTIMATED			2024 Taxes: \$ 1,620.08
Legal Description MICHELS SUBDIV PLAT 1 LOT 10 2000R02648 116X124.93' 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,951	0	36,544	0	41,495		
	2024	4,880	0	41,967	0	46,847		

Land Fair Cash Val: 14,640 Building Fair Cash Val: 125,901 **Non-Farm Value: 140,541**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD SEN FREEZE	6000 10292
2024	OWNER OCCUPD SEN FREEZE	6000 15644

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/2000	\$76,635		Yes
08/31/2009	\$100,000	2009R05046	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-325-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-326-001-00 101 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DEMICHEL BRENT M & STACEY A

101 HICKORY ST
PO BOX 851
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$73,580 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 14,640 Building Fair Cash Val: 206,100 Non-Farm Value: 220,740

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows 6000 for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows data for 05/17/2011 sale.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-326-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-326-003-00 121 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEEL AARON

121 HICKORY ST
PO BOX 783
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$72,396** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-326-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 4,534.92		ESTIMATED		2024 Taxes: \$ 4,914.30
Legal Description MICHELS SUBDIV PLAT 2 LOTS 12 & 13 230X124.93' 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	10,032	0	52,520	0	62,552		
	2024	9,883	0	62,513	0	72,396		

Land Fair Cash Val: 29,649 Building Fair Cash Val: 187,539 **Non-Farm Value: 217,188**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD IMPROVEMENT	6000 5113

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/29/2015	\$188,125	2015R02957	Yes
10/25/2018	\$152,500	2018R03527	Yes
09/28/2021	\$190,000	2021R04130	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-326-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-326-005-00 131 HICKORY ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WILDE BRUCE P & LYSA M

Address to send notice if different than shown at left:

PO BOX 325
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$73,263** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-326-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 4,893.62	ESTIMATED			2024 Taxes: \$ 5,393.83
Legal Description MICHELS SUBDIV PLAT 2 LOTS 14 & 15 2000-01009 115X124.93 231.93X124.93 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,897	0	59,440	0	69,337		
	2024	9,753	0	63,510	0	73,263		

Land Fair Cash Val: 29,259 Building Fair Cash Val: 190,530 **Non-Farm Value: 219,789**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 2312
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-326-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-326-006-00 130 E CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ELAM ANGELA M

130 E CEDAR ST
PO BOX 1034
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$42,304** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-326-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,400.90		ESTIMATED		2024 Taxes: \$ 2,911.23
Legal Description MICHELS SUBDIV PLAT 2 LOT 16 2004R04056(QCD) 2002-01028 116.89X124.93 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,987	0	30,953	0	35,940		
	2024	4,917	0	37,387	0	42,304		

Land Fair Cash Val: 14,751 Building Fair Cash Val: 112,161 **Non-Farm Value: 126,912**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/16/2008	\$90,000	2008R01968	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-326-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-326-007-00 124 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAVIS CANDICE

124 CEDAR ST
PO BOX 161
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$56,427** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-326-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,133.52		ESTIMATED 2024 Taxes: \$ 3,642.80	
Legal Description MICHELS SUBDIV PLAT 2 LOT 17 2003R03781 115X124.93 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,910	0	45,166	0	50,076	
	2024	4,837	0	51,590	0	56,427	

Land Fair Cash Val: 14,511 Building Fair Cash Val: 154,770 **Non-Farm Value: 169,281**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2003	\$95,287		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-326-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-326-008-00 104 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ECKHOFF RITA R

Address to send notice if different than shown at left:

PO BOX 414
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$42,204** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-326-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,400.92		ESTIMATED		2024 Taxes: \$ 1,400.92
Legal Description MICHELS SUBDIV PLAT 2 2002-05173 115X124.93	LOT 18 12-10-E	YEAR 2023	HOMESITE/LOTS 4,910	FARM LAND 0	BUILDINGS 31,567	FARM BLDGS 0	TOTAL 36,477	
		2024	4,837	0	37,367	0	42,204	

Land Fair Cash Val: 14,511 Building Fair Cash Val: 112,101 **Non-Farm Value: 126,612**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	SEN FREEZE	8007
	OWNER OCCUPD	6000
2024	ELDERLY	5000
	SEN FREEZE	13734
	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-326-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-326-009-00 102 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JACK WILLIAM & TABYTHA

102 CEDAR ST
PO BOX 556
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$46,190** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-326-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,786.38		ESTIMATED		2024 Taxes: \$ 3,222.84
Legal Description MICHELS SUBDIV PLAT 2 LOT 19 2002R01148 115X124.93' 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,910	0	35,837	0	40,747		
	2024	4,837	0	41,353	0	46,190		

Land Fair Cash Val: 14,511 Building Fair Cash Val: 124,059 **Non-Farm Value: 138,570**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/29/2005	\$100,000	2005R04298	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-326-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-326-010-00 100 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JAEGER BRIAN P

100 CEDAR ST
PO BOX 741
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$79,992** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-326-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,914.16	ESTIMATED			2024 Taxes: \$ 5,933.43
Legal Description MICHELS SUBDIV PLAT 2 LOT 20 2002-04634 116X124.93 12-10-E 2002-00419	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,951	0	49,860	0	54,811		
	2024	4,880	0	75,112	0	79,992		

Land Fair Cash Val: 14,640 Building Fair Cash Val: 225,336 **Non-Farm Value: 239,976**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2002	\$77,500		Yes
04/01/2013	\$115,000	2013R01385	Yes
09/20/2021	\$240,000	2021R04013	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-326-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-327-001-00 101 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ALARIA DALE L

Address to send notice if different than shown at left:

PO BOX 858
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$51,870** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-327-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,801.70		ESTIMATED		2024 Taxes: \$ 3,678.32
Legal Description MICHELS SUBDIV PLAT 3 LOT 21 2002-06567 113.75X124.94 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,858	0	36,080	0	40,938		
	2024	4,783	0	47,087	0	51,870		

Land Fair Cash Val: 14,349 Building Fair Cash Val: 141,261 **Non-Farm Value: 155,610**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-327-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-327-002-00 109 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

JENKINS DIXIE

Address to send notice if different than shown at left:

PO BOX 1205
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$78,326 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 14,349 Building Fair Cash Val: 220,629 Non-Farm Value: 234,978

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Lists exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows a sale on 07/01/2024 for \$235,000.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-327-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-327-003-00 117 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEZZE ANTHONY M & CHRISTINA

117 CEDAR ST
PO BOX 595
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$61,673** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-327-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description MICHELS SUBDIV PLAT 3 LOT 23 2003R04071 113.75X124.94 12-10-E 2003R04071	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,858	0	54,620	0	59,478		
	2024	4,783	0	56,890	0	61,673		

Land Fair Cash Val: 14,349 Building Fair Cash Val: 170,670 **Non-Farm Value: 185,019**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled 70-100% Ve	6000 53478
2024	OWNER OCCUPD Disabled 70-100% Ve	6000 55673

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2004	\$104,000		Yes
11/18/2009	\$128,500	2009R06425	Yes
07/02/2018	\$145,000	2018R02065	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-327-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-327-004-00 125 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JAEGER ALAN J & CASSANDRA J

125 CEDAR ST
PO BOX 641
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$58,210** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-327-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,740.16		ESTIMATED		2024 Taxes: \$ 4,186.73
Legal Description MICHELS SUBDIV PLAT 3 LOT 24 2003R03402 113.75X124.94 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,858	0	47,783	0	52,641		
	2024	4,783	0	53,427	0	58,210		

Land Fair Cash Val: 14,349 Building Fair Cash Val: 160,281 **Non-Farm Value: 174,630**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/16/2009	\$121,500	2009R06944	Yes
11/26/2012	\$145,500	2012R06442	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-327-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-327-005-00 131 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH BRIAN E & TINA

131 CEDAR ST
PO BOX 554
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$61,507** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-327-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 4,168.78	ESTIMATED			2024 Taxes: \$ 4,451.12
Legal Description MICHELS SUBDIV PLAT 3 LOT 25 2002-02964 122.85X124.94 12-10-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,243	0	52,743	0	57,986		
	2024	5,167	0	56,340	0	61,507		

Land Fair Cash Val: 15,501 Building Fair Cash Val: 169,020 **Non-Farm Value: 184,521**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-327-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-329-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MORGASON BRAD & EMILY

Address to send notice if different than shown at left:

PO BOX 291
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,078** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-329-001-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 407.22		ESTIMATED 2024 Taxes: \$ 0.00	
Legal Description LOT 1 FOLI'S MINOR SUBDIVISION 96X265 2017R04274 ST DOC# 85-11-279	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,078	0	0	0	5,078	
	2024	5,078	0	0	0	5,078	

Land Fair Cash Val: 15,234 Building Fair Cash Val: 0 **Non-Farm Value: 15,234**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/05/2023	\$40,000	2023R01495	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-329-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-329-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MORGASON BRAD & EMILY

Address to send notice if different than shown at left:

PO BOX 291
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,288** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-329-002-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 424.06	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description LOT 2 FOLI'S MINOR SUBDIVISION 100X265 2017R04274 ST DOC# 85-11-279	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,288	0	0	0	5,288		
	2024	5,288	0	0	0	5,288		

Land Fair Cash Val: 15,864 Building Fair Cash Val: 0 **Non-Farm Value: 15,864**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/05/2023	\$40,000	2023R01495	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-329-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-329-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MORGASON BRAD & EMILY

Address to send notice if different than shown at left:

PO BOX 291
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,288** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-329-003-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 424.06		ESTIMATED		2024 Taxes: \$ 0.00
Legal Description LOT 3 FOLI'S MINOR SUBDIVISION 100X265 2017R04274 ST DOC# 85-11-279	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,288	0	0	0	5,288		
	2024	5,288	0	0	0	5,288		

Land Fair Cash Val: 15,864 Building Fair Cash Val: 0 **Non-Farm Value: 15,864**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
06/05/2023	\$40,000	2023R01495	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-329-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-329-004-00 225 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MORGASON BRAD & EMILY

Address to send notice if different than shown at left:

PO BOX 291
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,288** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-329-004-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 424.06	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description LOT 4 FOLI'S MINOR SUBDIVISION 100X265 2017R04274 ST DOC# 85-11-279	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,288	0	0	0	5,288		
	2024	5,288	0	0	0	5,288		

Land Fair Cash Val: 15,864 Building Fair Cash Val: 0 **Non-Farm Value: 15,864**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/05/2023	\$40,000	2023R01495	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-329-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-329-005-00 225 CEDAR ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MORGASON BRAD & EMILY

Address to send notice if different than shown at left:

PO BOX 291
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$49,273** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-329-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 424.06		ESTIMATED		2024 Taxes: \$ 3,951.21
Legal Description LOT 1,2,3,4,5 & 6 FOLI'S MINOR SUBDIVISION 596.01X264.95 2017R04274 ST DOC# 85-11-279	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,288	0	0	0	5,288		
	2024	31,063	0	18,210	0	49,273		

Land Fair Cash Val: 93,189 Building Fair Cash Val: 54,630 **Non-Farm Value: 147,819**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
04/14/2023	\$8,000	2023R00982	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-329-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-329-006-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MORGASON BRAD & EMILY

Address to send notice if different than shown at left:

PO BOX 291
KINCAID

IL 62540

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$5,288 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for Year, Homesite/Lots, Farm Land, Buildings, Farm Bldgs, and Total.

Land Fair Cash Val: 15,864 Building Fair Cash Val: 0 Non-Farm Value: 15,864

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Includes one row of data)

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-329-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-001-00 601 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JACK RAMONA C (LSE)
% FRANKLIN A JACK (LSR)

PO BOX 1053
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,430** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-401-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID LOTS 1 & 2 BLK 39 2003R01747 152291.000 91-03502 80X100 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,809	0	17,383	0	20,192		
	2024	2,770	0	17,660	0	20,430		

Land Fair Cash Val: 8,310 Building Fair Cash Val: 52,980 **Non-Farm Value: 61,290**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	SEN FREEZE	9192
	Leasehold Owner	6000
2024	ELDERLY	5000
	SEN FREEZE	9430
	Leasehold Owner	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1991	\$20,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-001-01 605 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JACK FRANKLIN A & KELLY A

605 PRAIRIE ST
PO BOX 1072
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,337** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-401-001-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 133.92	ESTIMATED 2024 Taxes: \$ 187.40	
Legal Description KINCAID LOTS 3 & 4 BLK 39 MHRE 97-06775 80X100 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL
	2023	2,809	0	4,861	0	7,670
	2024	2,770	0	5,567	0	8,337

Land Fair Cash Val: 8,310 Building Fair Cash Val: 16,701 **Non-Farm Value: 25,011**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-002-00 609 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREGORY MARC S & MELANIE S

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,332** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-401-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,056.92	ESTIMATED			2024 Taxes: \$ 1,389.86
Legal Description KINCAID LTS 5 & 6 BLK 39 152295.000 2003R09764 80X100 12-10-G 93-1111	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,809	0	16,371	0	19,180		
	2024	2,770	0	14,562	0	17,332		

Land Fair Cash Val: 8,310 Building Fair Cash Val: 43,686 **Non-Farm Value: 51,996**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/1993	\$25,500		Yes
10/23/2007	\$52,000	2007R05168	No
05/26/2023	\$52,000	2023R01425	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-003-00 613 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

GREGORY MARC S & MELANIE S

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$21,332 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 4,149 Building Fair Cash Val: 59,847 Non-Farm Value: 63,996

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Row: OWNER OCCUPD, 6000, 2023.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Rows: 03/01/1992, 11/09/2006, 12/08/2023.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-004-00 617 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WOLFE JENNY

Address to send notice if different than shown at left:

PO BOX 1005
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,037** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-401-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,015.38		ESTIMATED		2024 Taxes: \$ 1,606.77
Legal Description KINCAID LTS 8 & 9 BLK 39 152299.000 80X100 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,809	0	15,853	0	18,662		
	2024	2,770	0	23,267	0	26,037		

Land Fair Cash Val: 8,310 Building Fair Cash Val: 69,801 **Non-Farm Value: 78,111**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-005-00 621 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BAJRAMI JACLYN H TRUSTEE

621 PRAIRIE ST
PO BOX 897
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,793** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-401-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,975.50	ESTIMATED			2024 Taxes: \$ 3,271.20
Legal Description KINCAID LOT 10 & W36' LOT 11 BLK 39 152301.000 BK223/P395 76X100 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,671	0	32,964	0	35,635		
	2024	2,630	0	38,163	0	40,793		

Land Fair Cash Val: 7,890 Building Fair Cash Val: 114,489 **Non-Farm Value: 122,379**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023	
Leasehold Owner	6000
ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/04/2015	\$57,000	2015R02185	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-007-00 627 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

WRIGHT RONALD E & GLORIA

627 PRAIRIE ST
PO BOX 508
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$77,494 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 17,031 Building Fair Cash Val: 215,451 Non-Farm Value: 232,482

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Tax Year, Exemption History, Amount. Rows for 2023 and 2024 with ELDERLY OWNER OCCUPD exemptions.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Date Sold, Sale Price, Doc#, Qualified? under Sales History header.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-008-00 631 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WOLF DERRICK

631 PRAIRIE ST
PO BOX
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,997** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-401-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 671.20	ESTIMATED			2024 Taxes: \$ 2,325.28
Legal Description KINCAID LOTS 16 & 17 BLK 39 2003R01561 152306.000 2002-05205 80X100 12-10-G B323 P30 98-03996	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,809	0	23,809	0	26,618		
	2024	2,770	0	32,227	0	34,997		

Land Fair Cash Val: 8,310 Building Fair Cash Val: 96,681 **Non-Farm Value: 104,991**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY SEN FREEZE	6000 5000 7248
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2002	\$70,000		Yes
08/08/2023	\$105,000	2023R02243	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-009-00 635 PRAIRIE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRISON PATRICK L & SARA M

635 PRAIRIE ST
PO BOX 1198
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,143** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-401-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,348.64		ESTIMATED	2024 Taxes: \$ 1,454.89	
Legal Description KINCAID LT 18 BLK 39 152308.000 B214 P339 67X100AV 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,354	0	20,464	0	22,818		
	2024	2,320	0	21,823	0	24,143		

Land Fair Cash Val: 6,960 Building Fair Cash Val: 65,469 **Non-Farm Value: 72,429**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/13/2005	\$42,000	2005R05232	Yes
10/17/2006	\$58,500	2006R05182	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-010-00 634 TOWER PL KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GESELL GARY E

634 TOWER PL
PO BOX 902
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,167** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-401-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 321.56		ESTIMATED 2024 Taxes: \$ 321.56	
Legal Description KINCAID LT 19 BLK 39 87-19610 152309.000 96-00261 45X126AV 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,772	0	18,593	0	20,365	
	2024	1,747	0	31,420	0	33,167	

Land Fair Cash Val: 5,241 Building Fair Cash Val: 94,260 **Non-Farm Value: 99,501**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	SEN FREEZE	5355
	OWNER OCCUPD	6000
	ELDERLY	5000
2024	SEN FREEZE	5927
	OWNER OCCUPD	6000
	ELDERLY	5000
	IMPROVEMENT	12230

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-011-00 630 TOWER PL KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LAND GESELL LISA

Address to send notice if different than shown at left:

PO BOX 1128
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,790** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-401-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 421.40		ESTIMATED		2024 Taxes: \$ 624.68
Legal Description KINCAID LOTS 20 & 21 BLK 39 1994R02019 80X125' 152311.000 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	10,512	0	13,662		
	2024	3,107	0	12,683	0	15,790		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 38,049 **Non-Farm Value: 47,370**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled Person	2000
	OWNER OCCUPD IMPROVEMENT	6000
		407
2024	Disabled Person	2000
	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-012-00 628 TOWER PL KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURVEY BERNARD A & JANE E (LSR)
FOR JESSICA HEATH (LSE)

PO BOX 677
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,553** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-10-401-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 643.46	ESTIMATED			2024 Taxes: \$ 926.44
Legal Description KINCAID E35 LOT 22 BLK 39 CFD 152312.000 79-27140 35X125 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,378	0	12,646	0	14,024		
	2024	1,360	0	16,193	0	17,553		

Land Fair Cash Val: 4,080 Building Fair Cash Val: 48,579 **Non-Farm Value: 52,659**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000
<u>Tax Year</u> 2024 Leasehold Owner	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1979	\$24,250		Yes
12/28/2004	\$50,000	2004R08079	Yes
12/19/2017	\$13,861	2017R04506	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-013-00 626 TOWER PL KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SOUTH AUNDREA N

Address to send notice if different than shown at left:

PO BOX 854
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,864** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-401-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 999.02	ESTIMATED			2024 Taxes: \$ 951.38
Legal Description KINCAID W5 LOT 22 & ALL LOT 23 BLK 39 2003R07629 152313.000 76-8288 45X125 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,772	0	16,686	0	18,458		
	2024	1,747	0	16,117	0	17,864		

Land Fair Cash Val: 5,241 Building Fair Cash Val: 48,351 **Non-Farm Value: 53,592**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/29/2019	\$45,000	2019R01258	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-014-00 624 TOWER PL KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MICHEL ROBERT L & SHARON A (LSR)
FOR GERI JO PAGE (LSE)

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,390** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-401-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 426.46	ESTIMATED			2024 Taxes: \$ 752.99
Legal Description KINCAID LT 24 BLK 39 2000-00906 152314.000 B257 P244 40X125 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	9,743	0	11,318		
	2024	1,553	0	13,837	0	15,390		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 41,511 **Non-Farm Value: 46,170**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000
<u>Tax Year</u> 2024 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-015-00 622 TOWER PL KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PRINCE CHARLES & SUSAN

622 TOWER PL
PO BOX 796
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,360** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-401-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 92.62
Legal Description KINCAID LTS 25 & 26 BLK 39 152315.000 86-15611 80X125 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,150	0	9,061	0	12,211		
	2024	3,107	0	11,253	0	14,360		

Land Fair Cash Val: 9,321 Building Fair Cash Val: 33,759 **Non-Farm Value: 43,080**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	IMPROVEMENT	2232
	ELDERLY	3979
	SEN FREEZE	0
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	2205

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1986	\$25,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-016-00 618 TOWER PL KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SIEBERT AYRAN

Address to send notice if different than shown at left:

PO BOX 775
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$15,123 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 6,990 Building Fair Cash Val: 38,379 Non-Farm Value: 45,369

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Exemption History, Amount. Rows for Tax Year 2023 and 2024, both showing OWNER OCCUPD with amounts 0 and 6000.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Rows for sales on 09/01/1985, 05/18/2011, and 10/26/2023.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-017-00 614 TOWER PL KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLAKE DAVID & GEORGIA

614 TOWER PL
PO BOX 1168
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,493** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-401-017-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 980.58	ESTIMATED			2024 Taxes: \$ 1,162.20
Legal Description KINCAID W1/2 LT 28 & ALL LT 29 BLK 39 2004R05909(QCD) 152319.000 60X125 12-10-G 1994R01334 2004R05490(QCD)	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,362	0	15,866	0	18,228		
	2024	2,330	0	18,163	0	20,493		

Land Fair Cash Val: 6,990 Building Fair Cash Val: 54,489 **Non-Farm Value: 61,479**

****Required**** Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/1994	\$36,000		Yes
07/27/2012	\$32,000	2012R04210	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-018-00 612 TOWER PL KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MICHEL ROBERT L & SHARON A (LSR)
FOR BONNIE RIGGS (LSE)

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,553** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-401-018-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 457.98		ESTIMATED 2024 Taxes: \$ 846.25	
Legal Description KINCAID LT 30 BLK 39 152320.000 40X125 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,575	0	10,136	0	11,711	
	2024	1,553	0	15,000	0	16,553	

Land Fair Cash Val: 4,659 Building Fair Cash Val: 45,000 **Non-Farm Value: 49,659**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	6000
<u>Tax Year</u> 2024 Leasehold Owner	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/05/2014	\$29,000	2014R04661	No
01/30/2017	\$135,000	2017R00370	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-018-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-019-00 610 TOWER PL KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREGORY MARC S & MELANIE S

Address to send notice if different than shown at left:

PO BOX 1075
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,332** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-401-019-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 1,550.24
Legal Description KINCAID LT 31 BLK 39 152321.000 81-34997 40X125 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	16,604	0	18,179		
	2024	1,553	0	17,779	0	19,332		

Land Fair Cash Val: 4,659 Building Fair Cash Val: 53,337 **Non-Farm Value: 57,996**

****Required****


Complainant's Estimated Correct Assessed Valuations:

Exemption History

Amount

**Tax Year
2023**

ELDERLY 5000
OWNER OCCUPD 6000
SEN FREEZE 7179

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History

Date Sold	Sale Price	Doc#	Qualified?
01/01/1981	\$26,500		Yes
09/25/2023	\$58,000	2023R02698	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-019-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-020-00 608 TOWER PL KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ETC CUST FBO VELMA JOST IRA 113534
 %PIP-WEST LLC
 STE 129
 20 TOWNE DR
 BLUFFTON SC 29910

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,483** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-401-020-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 121.74		ESTIMATED	2024 Taxes: \$ 118.92	
Legal Description KINCAID LT 32 BLK 39 152322.000 81-36085 40X125 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	874	0	644	0	1,518		
	2024	860	0	623	0	1,483		

Land Fair Cash Val: 2,580 Building Fair Cash Val: 1,869 **Non-Farm Value: 4,449**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-401-020-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-401-021-00 604 TOWER PL KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MIDLAND UNITED METHODIST CHURCH

600 TOWER PL
PO BOX 530
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-401-021-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID LOTS 33 34 35 & 36 BLK 39 160X125' BK135 PG522 ST DOC# 85-11-33	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0		
	2024	0	0	0	0	0		

15-12-10-401-021-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-001-00 218 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PASO SUE

Address to send notice if different than shown at left:

PO BOX 167
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$57,107** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-402-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,227.50	ESTIMATED			2024 Taxes: \$ 3,697.33
Legal Description KINCAID LT 1 EX E125 BLK 25 94-02976 152058.000 96-01583 200X140 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	8,564	0	42,684	0	51,248		
	2024	8,440	0	48,667	0	57,107		

Land Fair Cash Val: 25,320 Building Fair Cash Val: 146,001 **Non-Farm Value: 171,321**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-402-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-002-00 216 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RIVA KAREN JOAN

Address to send notice if different than shown at left:

PO BOX 718
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,763** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-402-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 692.52		ESTIMATED 2024 Taxes: \$ 692.52	
Legal Description KINCAID LT 23 BLK 25 152078.000 88-5056 76X170 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,449	0	20,714	0	24,163	
	2024	3,400	0	22,363	0	25,763	

Land Fair Cash Val: 10,200 Building Fair Cash Val: 67,089 **Non-Farm Value: 77,289**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	4527
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	6127

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1988	\$28,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-402-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-003-00 214 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SIERE DIANNA J & STEVEN A

Address to send notice if different than shown at left:

PO BOX 162
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,997** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-402-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,069.02		ESTIMATED		2024 Taxes: \$ 1,523.37
Legal Description KINCAID LT 22 BLK 25 90-00637 152077.000 89-11073 77X185 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,592	0	20,739	0	24,331		
	2024	3,543	0	26,454	0	29,997		

Land Fair Cash Val: 10,629 Building Fair Cash Val: 79,362 **Non-Farm Value: 89,991**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/23/2024	\$90,000	2024R01474	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-402-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-004-00 212 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

POWELL PRINGLE PAULA KAY

212 CENTRAL AVE
PO BOX 272
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,754** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-402-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL
KINCAID LTS 20 & 21 BLK 25 92-05532 152076.000 92-04557 196X219AV 12-10-G		2023	6,128	0	14,890	0	21,018
		2024	6,037	0	22,717	0	28,754

Land Fair Cash Val: 18,111 Building Fair Cash Val: 68,151 **Non-Farm Value: 86,262**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled 70-100% Ve	14260
	IMPROVEMENT	758
2024	OWNER OCCUPD	6000
	Disabled 70-100% Ve	21996
	IMPROVEMENT	758

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1992	\$28,000		Yes
10/15/2019	\$40,000	2019R03549	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-402-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-005-00 206 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PETERS FRED & VIRGINIA

Address to send notice if different than shown at left:

111 W POPLAR ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$82,992** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-402-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 4,828.66		ESTIMATED	2024 Taxes: \$ 5,773.05	
Legal Description KINCAID LTS 18 & 19 BLK 25 152073.000 73-9449 188X214AV 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	8,937	0	62,278	0	71,215		
	2024	8,807	0	74,185	0	82,992		

Land Fair Cash Val: 26,421 Building Fair Cash Val: 222,555 **Non-Farm Value: 248,976**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/15/2022	\$249,000	2022R04153	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-402-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-006-00 204 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ORRISON ROBERT & CINDY F

Address to send notice if different than shown at left:

PO BOX 588
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,733** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-402-006-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 279.30		ESTIMATED 2024 Taxes: \$ 138.97	
Legal Description KINCAID LOT 17 BLK 25 152072.000 B200 P137 76X174AV 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,483	0	0	0	3,483	
	2024	1,733	0	0	0	1,733	

Land Fair Cash Val: 5,199 Building Fair Cash Val: 0 **Non-Farm Value: 5,199**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/20/2005	\$25,000	2005R03522	No
09/11/2009	\$40,000	2009R05257	No
10/06/2009	\$7,000	2009R05672	No
08/04/2023	\$5,000	2023R02211	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-402-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-007-00 202 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NAVE VIRGINIA

202 CENTRAL AVE
PO BOX 1056
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,726** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-402-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID LT 16 BLK 25 95-1148 152071.000 93-01719 75.5X159AV 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,332	0	10,484	0	13,816		
	2024	3,283	0	7,443	0	10,726		

Land Fair Cash Val: 9,849 Building Fair Cash Val: 22,329 **Non-Farm Value: 32,178**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	2816
2024	ELDERLY	4726
	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/1995	\$19,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-402-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-008-00 200 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BURCHI JASON

PO BOX 591
200 CENTRAL AVE
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,436** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-402-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 963.98		ESTIMATED 2024 Taxes: \$ 1,237.82	
Legal Description KINCAID LT 15 BLK 25 152070.000 2004R00013 63X155AV 12-10-G BK195 PG461	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,753	0	15,268	0	18,021	
	2024	2,713	0	18,723	0	21,436	

Land Fair Cash Val: 8,139 Building Fair Cash Val: 56,169 **Non-Farm Value: 64,308**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-402-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-009-00 201 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ORRISON ROBERT L

201 SUMMIT AVE
PO BOX 588
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$36,630** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-402-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,022.40		ESTIMATED	2024 Taxes: \$ 2,456.23
Legal Description KINCAID LTS 13 & 14 BLK 25 152069.000 81-38960 139X144AV 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,000	0	27,494	0	32,494	
	2024	5,807	0	30,823	0	36,630	

Land Fair Cash Val: 17,421 Building Fair Cash Val: 92,469 **Non-Farm Value: 109,890**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 1274
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1981	\$16,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-402-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-010-00 205 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TREUTHART PHILLIP H

205 SUMMIT AVE
PO BOX 255
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,140** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-402-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,702.28		ESTIMATED	2024 Taxes: \$ 1,775.41	
Legal Description KINCAID SWLY HALF LOT 11 & ALL LOT 12 2003R07844 152067.000 115.1X158.43 12-10-G 1993R02072	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,078	0	27,150	0	32,228		
	2024	5,003	0	28,137	0	33,140		

Land Fair Cash Val: 15,009 Building Fair Cash Val: 84,411 **Non-Farm Value: 99,420**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1993	\$29,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-402-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-012-00 209 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SMITH TIMOTHY B

P O BOX 364
209 SUMMIT AVE
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$26,180 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 17,799 Building Fair Cash Val: 60,741 Non-Farm Value: 78,540

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? (Sales History)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-402-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-013-00 211 EDINBURG AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KINCAID CHURCH OF GOD

Address to send notice if different than shown at left:

PO BOX 589
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-402-013-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID LOT 9 BLK 25 PARSONAGE 95AVX228AV ST DOC# 84-11-7 152064.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-10-402-013-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-013-01 215 EDINBURG AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HAYS DESTINY MARIE

215 EDINBURG AVE
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$2,507 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 7,521 Building Fair Cash Val: 0 Non-Farm Value: 7,521

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Includes sales from 2015 and 2023)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-402-013-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-014-00 215 EDINBURG AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HAYS DESTINY MARIE

Address to send notice if different than shown at left:

215 EDINBURG AVE
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,037** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-402-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 292.14	ESTIMATED			2024 Taxes: \$ 885.06
Legal Description KINCAID LT 7 BLK 25 2000-04529 99-03735 152062.000 96-05076 75X206 12-10-G 90-02574	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,565	0	18,099	0	21,664		
	2024	3,513	0	13,524	0	17,037		

Land Fair Cash Val: 10,539 Building Fair Cash Val: 40,572 **Non-Farm Value: 51,111**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
	SEN FREEZE	5021
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/07/2023	\$65,000	2023R02522	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-402-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-015-00 217 EDINBURG AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HAYS DESTINY MARIE

Address to send notice if different than shown at left:

215 EDINBURG AVE
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$2,120 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated _____
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for Year, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 6,360 Building Fair Cash Val: 0 Non-Farm Value: 6,360

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Includes entry for 09/07/2023, \$65,000, 2023R02522, No)

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___/___/2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-402-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-016-00 219 EDINBURG AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TURNBULL BRET A & AMANDA M

PO BOX 421
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$57,153** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-402-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,986.58	ESTIMATED			2024 Taxes: \$ 4,101.97
Legal Description KINCAID LTS 4 & 5 BLK 25 152060.000 151.4X189AV 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,079	0	49,933	0	56,012		
	2024	5,990	0	51,163	0	57,153		

Land Fair Cash Val: 17,970 Building Fair Cash Val: 153,489 **Non-Farm Value: 171,459**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 298
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/25/2015	\$137,000	2015R02462	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-402-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-402-017-00 223 EDINBURG AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOORE STEVEN R

2358 S 8TH ST
SPRINGFIELD IL 62703

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,499** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-402-017-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,295.48		ESTIMATED		2024 Taxes: \$ 681.54
Legal Description KINCAID E125 LT 1 BLK 25 92-3036 152059.000 95-05811 127.57X241.625 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,211	0	15,944	0	22,155		
	2024	4,793	0	3,706	0	8,499		

Land Fair Cash Val: 14,379 Building Fair Cash Val: 11,118 **Non-Farm Value: 25,497**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/05/2019	\$23,251	2019R03006	No
10/23/2023	\$25,500	2023R03079	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-402-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-403-001-00 612 DIAL ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SOUTH FORK COMM HIGH SCHOOL
DIST 14

PO BOX 20
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-403-001-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description KINCAID BLK 6 280X560AV ST DOC# 85-11-191 151920.000 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-10-403-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-404-001-00 206 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ORRISON ZACHARY R

206 S SUMMIT AVE
PO BOX 1192
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,734** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-404-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,287.68		ESTIMATED	2024 Taxes: \$ 2,294.80
Legal Description KINCAID N1/2 BLK 29 152082.001 B234 P58 230X250X278 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	6,370	0	28,158	0	34,528	
	2024	6,277	0	28,457	0	34,734	

Land Fair Cash Val: 18,831 Building Fair Cash Val: 85,371 **Non-Farm Value: 104,202**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2024	IMPROVEMENT	117

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/14/2010	\$48,500	2010R00177	No
03/13/2013	\$84,200	2013R01125	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-404-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-404-002-00 850 DIAL ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAUGHERTY JEFFREY & SUSAN

850 DIAL ST
PO BOX 102
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,663** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-404-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,615.12		ESTIMATED	2024 Taxes: \$ 1,817.35
Legal Description KINCAID S1/2 BLK 29 152082.000 2001-03033 12-10-G 99-01084 97-03014 97-03016	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,649	0	23,492	0	26,141	
	2024	2,610	0	26,053	0	28,663	

Land Fair Cash Val: 7,830 Building Fair Cash Val: 78,159 **Non-Farm Value: 85,989**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-404-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-405-001-00 601 DIAL ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF KINCAID

Address to send notice if different than shown at left:

115 CENTRAL AVE
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: A REVALUATION OF PROPERTY.

Parcel Number 15-12-10-405-001-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID LTS 1 & 2 BLK 2 151710.000 50X125 12-10-G ST DOC 23-011-00016	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,972	0	0	0	2,972		
	2024	0	0	0	0	0		

15-12-10-405-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/22/2007	\$9,000	2007R01378	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-405-002-00 607 DIAL ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

APIF ILLINOIS LLC

STE 800
950 TOWER LN
FOSTER CITY CA 94404

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$26,842 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 13,347 Building Fair Cash Val: 67,179 Non-Farm Value: 80,526

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? (Sales History)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-405-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-405-003-00 611 DIAL ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ALLEN PAUL E

Address to send notice if different than shown at left:

100 E 400 NORTH RD
OCONEE

IL 62553

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$98,343** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-405-003-00	Class 0050	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 6,727.00	ESTIMATED			2024 Taxes: \$ 7,886.14
Legal Description KINCAID LTS 6 7 8 9 BLK 2 94-1994 151716.000 92-3391 134X136 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,509	0	78,379	0	83,888		
	2024	5,430	0	92,913	0	98,343		

Land Fair Cash Val: 16,290 Building Fair Cash Val: 278,739 **Non-Farm Value: 295,029**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1994	\$155,000		Yes
02/28/2011	\$205,000	2011R01000	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-405-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-405-004-00 112 STATE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF KINCAID

Address to send notice if different than shown at left:

PO BOX 615
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-405-004-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID LOTS 10 THRU 16 & LOTS 19 THRU 24 1984R03394 1984R03699 1984R03700 ST DOC# 85-11-6	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-10-405-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-405-007-00 100 STATE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ILL CONS TELEPHONE CO

BOX 560
121 S 17TH ST
MATTOON

IL 61938

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,760** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-405-007-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,263.38	ESTIMATED			2024 Taxes: \$ 2,065.70
Legal Description KINCAID LTS 17 & 18 BLK 2 151728.000 60X80AV 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,850	0	26,375	0	28,225		
	2024	1,823	0	23,937	0	25,760		

Land Fair Cash Val: 5,469 Building Fair Cash Val: 71,811 **Non-Farm Value: 77,280**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-405-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-406-001-00 100 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SEDLOCK GARY & CAROL

Address to send notice if different than shown at left:

PO BOX 860
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,999** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-406-001-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 458.54		ESTIMATED 2024 Taxes: \$ 721.63	
Legal Description KINCAID LT 37 BLK 3 99-05183 151770.000 2003R03680 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,642	0	3,076	0	5,718	
	2024	2,603	0	6,396	0	8,999	

Land Fair Cash Val: 7,809 Building Fair Cash Val: 19,188 **Non-Farm Value: 26,997**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1999	\$18,500		Yes
02/27/2023	\$27,000	2023R00521	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-406-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-406-002-00 114 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BELMONTE & SONS LLC

2915 CLEARWATER AVE
BLOOMINGTON IL 61704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$53,328** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-406-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,137.96		ESTIMATED 2024 Taxes: \$ 4,276.38	
Legal Description KINCAID LTS 38 39 & 40 BLK 3 151773.000 72-5554 75X125 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,953	0	23,708	0	26,661	
	2024	2,913	0	50,415	0	53,328	

Land Fair Cash Val: 8,739 Building Fair Cash Val: 151,245 **Non-Farm Value: 159,984**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/17/2006	\$36,500	2006R05816	Yes
08/20/2019	\$56,000	2019R02769	Yes
06/01/2022	\$160,000	2022R02014	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-406-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-406-003-00 122 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SOUTH FORK TOWNSHIP
TOWNSHIP BUILDING

PO BOX 258
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-406-003-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID LTS 41 THRU 45 BLK 3 TWP HALL & SUPERVISORS OFFICE 125X125 73-9725	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-10-406-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-406-004-00 126 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOBBS JARED R & KRISTA A

322 WILLOW
PO BOX 983
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,643** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-406-004-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 95.04		ESTIMATED		2024 Taxes: \$ 372.32
Legal Description KINCAID LTS 46 & 47 BLK 3 151780.000 2001-03163 50X125 12-10-G 98-08383 90-05482	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,035	0	150	0	1,185		
	2024	1,940	0	2,703	0	4,643		

Land Fair Cash Val: 5,820 Building Fair Cash Val: 8,109 **Non-Farm Value: 13,929**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/26/2007	\$42,000	2007R00411	Yes
08/25/2016	\$2,750	2016R03105	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-406-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-406-005-00 130 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOTTOMS LANA

Address to send notice if different than shown at left:

2073 SCARBROUGH RD
SPRINGFIELD IL 62702

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,053** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-406-005-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 69.28		ESTIMATED		2024 Taxes: \$ 886.34
Legal Description KINCAID LT 48 BLK 3 151781.000 88-3998 25X125 12-10-G		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	777	0	87	0	864	
		2024	970	0	10,083	0	11,053	

Land Fair Cash Val: 2,910 Building Fair Cash Val: 30,249 **Non-Farm Value: 33,159**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
09/14/2016	\$5,000	2016R03424	No
01/17/2023	\$10,000	2023R00138	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-406-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-406-006-00 132 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ALARIA DALE

PO BOX 861
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,307** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-406-006-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 838.88	ESTIMATED			2024 Taxes: \$ 826.52
Legal Description KINCAID LOT 49 BLK 3 25X125' 151782.000 12-10-G		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	1,423	0	9,038	0	10,461	
		2024	970	0	9,337	0	10,307	

Land Fair Cash Val: 2,910 Building Fair Cash Val: 28,011 **Non-Farm Value: 30,921**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/02/2008	\$35,000	2008R02946	No
08/21/2017	\$25,000	2017R03052	Yes
12/30/2020	\$75,000	2020R05266	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-406-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-406-007-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DUNKIRK GARY L

Address to send notice if different than shown at left:

508 N CHEROKEE ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,210** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-406-007-01	Class 0060	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,429.76	ESTIMATED			2024 Taxes: \$ 2,502.74
Legal Description KINCAID LOTS 50 THRU 54 BLK 3 1992R05783 1992R05784 151785.001 50X125 & 75X175 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,232	0	23,068	0	30,300		
	2024	7,450	0	23,760	0	31,210		

Land Fair Cash Val: 22,350 Building Fair Cash Val: 71,280 **Non-Farm Value: 93,630**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1992	\$34,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-406-007-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-406-008-00 144 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MASTERSON MICHAEL J

146 CENTRAL AVE
PO BOX 137
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,213** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-406-008-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,076.50		ESTIMATED	2024 Taxes: \$ 2,663.36	
Legal Description KINCAID LTS 55 & 56 BLK 3 151788.000 98-06205 50X125 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,968	0	36,397	0	38,365		
	2024	1,940	0	31,273	0	33,213		

Land Fair Cash Val: 5,820 Building Fair Cash Val: 93,819 **Non-Farm Value: 99,639**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/07/2017	\$90,000	2017R03264	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-406-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-406-010-00 703 DIAL ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MASTERSON MICHAEL J

Address to send notice if different than shown at left:

PO BOX 137
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,063** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-406-010-00	Class 0064	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 202.72		ESTIMATED		2024 Taxes: \$ 406.00
Legal Description KINCAID LTS 1 2 3 4 & 5 BLK 3 CITY HALL FIRE DEPT & GARAGE 103X133AV & 26X106AV ST DOC# 85-11-283 151738.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,347	0	181	0	2,528		
	2024	5,063	0	0	0	5,063		

Land Fair Cash Val: 15,189 Building Fair Cash Val: 0 **Non-Farm Value: 15,189**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/12/2019	\$3,500	2019R01866	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-406-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-406-011-00 713 DIAL ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ALLEN PAUL E

Address to send notice if different than shown at left:

100 E 400 NORTH RD
OCONEE

IL 62553

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$37,146** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-406-011-00	Class 0050	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,794.42	ESTIMATED			2024 Taxes: \$ 2,978.75
Legal Description KINCAID LTS 6 7 8 & 9 BLK 3 APARTMENTS 151739.000 94-00657 101X163AV 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,500	0	17,877	0	22,377		
	2024	4,433	0	32,713	0	37,146		

Land Fair Cash Val: 13,299 Building Fair Cash Val: 98,139 **Non-Farm Value: 111,438**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/20/2005	\$10	2005R03495	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-406-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-406-012-00 151 N SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BACA RONALD MARVIN & MARIA ANGELES

Address to send notice if different than shown at left:

PO BOX 875
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$41,996** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-406-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,666.64	ESTIMATED			2024 Taxes: \$ 3,367.67
Legal Description KINCAID LTS 10 11 & 12 BLK 3 MHRE 99-07907 151744.000 95-4832 75X182AV 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,502	0	29,752	0	33,254		
	2024	3,450	0	38,546	0	41,996		

Land Fair Cash Val: 10,350 Building Fair Cash Val: 115,638 **Non-Farm Value: 125,988**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/21/2021	\$126,000	2021R04029	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-406-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-406-013-00 139 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MASTERSON MICHAEL J

146 N CENTRAL AVE
PO BOX 137
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,920** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-406-013-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 563.18	ESTIMATED			2024 Taxes: \$ 554.92
Legal Description KINCAID LOTS 13 14 15 16 17 18 19 & 20 BLK 3 1988R02437 151746.000 1998R06205 200X100 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,023	0	0	0	7,023		
	2024	6,920	0	0	0	6,920		

Land Fair Cash Val: 20,760 Building Fair Cash Val: 0 **Non-Farm Value: 20,760**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/07/2017	\$90,000	2017R03264	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-406-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-406-017-00 125 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EYER MATTHEW B

125 SUMMIT AVE
PO BOX 694
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,632** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-406-017-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 723.48		ESTIMATED 2024 Taxes: \$ 852.58	
Legal Description KINCAID LOTS 21 22 & 23 BLK 3 98-08230 151756.000 B328 P496 75X100 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,633	0	12,389	0	15,022	
	2024	2,597	0	14,035	0	16,632	

Land Fair Cash Val: 7,791 Building Fair Cash Val: 42,105 **Non-Farm Value: 49,896**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/12/2015	\$32,500	2015R02311	Yes
04/25/2016	\$37,000	2016R01507	Yes
01/08/2021	\$49,900	2021R00096	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-406-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-406-018-00 119 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LYNN WILTON P & SHELBY

119 SUMMIT AVE
PO BOX 142
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,600** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-406-018-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 173.22	ESTIMATED			2024 Taxes: \$ 173.21
Legal Description KINCAID LTS 24 25 26 27 BLK 3 151757.000 100X100 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,512	0	18,012	0	21,524		
	2024	3,460	0	17,140	0	20,600		

Land Fair Cash Val: 10,380 Building Fair Cash Val: 51,420 **Non-Farm Value: 61,800**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	8364
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	7440

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-406-018-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-406-019-00 111 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BARTON MICHELLE

PO BOX 1122
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,937** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-406-019-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 157.58		ESTIMATED		2024 Taxes: \$ 155.33
Legal Description KINCAID LTS 28 & 29 BLK 3 2002-01029 151758.000 74.6X100AV 12-10-G 90-03228	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,965	0	0	0	1,965		
	2024	1,937	0	0	0	1,937		

Land Fair Cash Val: 5,811 Building Fair Cash Val: 0 **Non-Farm Value: 5,811**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/14/2007	\$6,000	2007R04477	Yes
04/03/2019	\$4,000	2019R01010	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-406-019-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-406-020-00 710 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MICHEL ROBERT L & SHARON A

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,690** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-406-020-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,628.56	ESTIMATED			2024 Taxes: \$ 2,541.23
Legal Description KINCAID LTS 30 THRU 36 BLK 3 151763.000 176X127AV 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,423	0	23,356	0	32,779		
	2024	9,283	0	22,407	0	31,690		

Land Fair Cash Val: 27,849 Building Fair Cash Val: 67,221 **Non-Farm Value: 95,070**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/28/2008	\$15,000	2008R02836	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-406-020-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-407-001-00 104 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FLEMING DANIEL L SR

104 SUMMIT AVE
PO BOX 495
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,050** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-407-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 880.82		ESTIMATED 2024 Taxes: \$ 886.10	
Legal Description KINCAID LTS 18 19 & 20 BLK 5 2001-06082 151809.000 B204 P176 126X202AV 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,989	0	12,995	0	18,984	
	2024	5,903	0	13,147	0	19,050	

Land Fair Cash Val: 17,709 Building Fair Cash Val: 39,441 **Non-Farm Value: 57,150**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled Person	6000 2000
2024	OWNER OCCUPD Disabled Person	6000 2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2001	\$45,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-407-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-407-002-00 108 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MAYBERRY ROBERT E SR & GENEVIEVE M

Address to send notice if different than shown at left:

PO BOX 217
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,900** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-407-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,178.64	ESTIMATED			2024 Taxes: \$ 1,194.83
Legal Description KINCAID LTS 21 & 22 BLK 5 2003R04984 151810.000 94-5037 70X200 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,327	0	11,371	0	14,698		
	2024	3,280	0	11,620	0	14,900		

Land Fair Cash Val: 9,840 Building Fair Cash Val: 34,860 **Non-Farm Value: 44,700**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1994	\$30,000		Yes
07/07/2010	\$19,900	2010R02839	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-407-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-407-003-00 110 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAVIS RAE

116 SUMMIT AVE
PO BOX 493
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,553** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-407-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 429.10	ESTIMATED			2024 Taxes: \$ 445.30
Legal Description KINCAID LTS 23 24 & 25 BLK 5 151812.000 92-3038 111.23X200.51 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,993	0	358	0	5,351		
	2024	5,210	0	343	0	5,553		

Land Fair Cash Val: 15,630 Building Fair Cash Val: 1,029 **Non-Farm Value: 16,659**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/12/2013	\$5,000	2013R01120	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-407-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-407-004-00 116 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COLE ANN M

Address to send notice if different than shown at left:

PO BOX 493
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,093** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-407-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,095.16		ESTIMATED 2024 Taxes: \$ 1,130.12	
Legal Description KINCAID LOT 26 & S9.00' LOT 27 BLK 5 151815.000 2003R09391 45.96X200.04 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,187	0	17,470	0	19,657	
	2024	2,153	0	17,940	0	20,093	

Land Fair Cash Val: 6,459 Building Fair Cash Val: 53,820 **Non-Farm Value: 60,279**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/2003	\$50,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-407-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-407-005-00 118 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GUIDOTTI CHARLES ROBERT

118 SUMMIT AVE
PO BOX 537
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,073** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-407-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 204.16	ESTIMATED			2024 Taxes: \$ 204.16
Legal Description KINCAID LOT 27 EX S9.00' & LOT 28 BLK 5 151816.000		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
92-00801 64.94X200.08 12-10-G		2023	3,089	0	14,558	0	17,647	
		2024	3,043	0	15,030	0	18,073	

Land Fair Cash Val: 9,129 Building Fair Cash Val: 45,090 **Non-Farm Value: 54,219**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	4101
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	4527

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-407-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-407-006-00 122 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

CAMPBELL RICHARD D JR

Address to send notice if different than shown at left:

PO BOX 625
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$22,698 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 7,380 Building Fair Cash Val: 60,714 Non-Farm Value: 68,094

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount. Rows for Tax Year 2023 and 2024, both showing OWNER OCCUPD with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Row: 10/25/2021, \$68,100, 2021R04548, Yes.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-407-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-407-007-00 126 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EDWARDS HEATHER B

P O BOX
126 SUMMIT AVE
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,773** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-407-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,801.48		ESTIMATED	2024 Taxes: \$ 1,665.79
Legal Description KINCAID N1/2 LT 30 & ALL LT 31 BLK 5 88-5089 151821.000 78-23720 52.5X200 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,494	0	25,971	0	28,465	
	2024	2,460	0	24,313	0	26,773	

Land Fair Cash Val: 7,380 Building Fair Cash Val: 72,939 **Non-Farm Value: 80,319**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1978	\$36,000		Yes
09/18/2018	\$69,400	2018R03060	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-407-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-407-008-00 130 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ITTENBACH NEIL A & KRISTA M JOHNSON

Address to send notice if different than shown at left:

PO BOX 1086
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,473** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-407-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,482.72	ESTIMATED			2024 Taxes: \$ 1,401.16
Legal Description KINCAID LTS 32 & 33 BLK 5 90-05417 151823.000 97-01205 70X200 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,327	0	21,163	0	24,490		
	2024	3,280	0	20,193	0	23,473		

Land Fair Cash Val: 9,840 Building Fair Cash Val: 60,579 **Non-Farm Value: 70,419**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/21/2004	\$9,500	2004R07980	No
06/15/2006	\$47,500	2006R02931	Yes
10/31/2018	\$59,700	2018R03593	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-407-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-407-009-00 135 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NYILAS STEPHANIE A

P O BOX 836
135 SUMMIT AVE
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,913** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-407-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,781.68	ESTIMATED			2024 Taxes: \$ 1,677.02
Legal Description KINCAID LTS 34 & 35 BLK 5 151825.000 96-02370 70X200 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,327	0	24,891	0	28,218		
	2024	3,280	0	23,633	0	26,913		

Land Fair Cash Val: 9,840 Building Fair Cash Val: 70,899 **Non-Farm Value: 80,739**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/15/2005	\$65,000	2005R03438	Yes
04/02/2012	\$55,000	2012R01796	Yes
05/11/2015	\$73,000	2015R01813	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-407-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-407-010-00 825 DIAL ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RAGLAND RICHARD M

825 DIAL ST
PO BOX 287
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,900** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-407-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,601.64	ESTIMATED			2024 Taxes: \$ 1,675.98
Legal Description KINCAID LTS 36 & 37 BLK 5 151827.000 89-7641 74X200AV 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,520	0	27,453	0	30,973		
	2024	3,467	0	28,433	0	31,900		

Land Fair Cash Val: 10,401 Building Fair Cash Val: 85,299 **Non-Farm Value: 95,700**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-407-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-407-011-00 127 PARK AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCHULTE VICTORIAA & FLORENCE

127 PARK AVE
PO BOX 1183
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,603** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-407-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,973.72	ESTIMATED			2024 Taxes: \$ 2,133.30
Legal Description KINCAID LTS 1 2 3 & 4 BLK 5 2000-03753 151795.000 72-1174 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,195	0	23,418	0	30,613		
	2024	7,090	0	25,513	0	32,603		

Land Fair Cash Val: 21,270 Building Fair Cash Val: 76,539 **Non-Farm Value: 97,809**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2000	\$47,400		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-407-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-407-012-00 121 PARK AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

POP DENISE R

121 PARK AVE
PO BOX 737
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,804** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-407-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,891.14		ESTIMATED	2024 Taxes: \$ 2,069.23	
Legal Description KINCAID LTS 5 6 7 8 BLK 5 151796.000 2000-05779 144X233AV 12-10-G 2002-05946QC 91-03375 77-17624	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,908	0	22,675	0	29,583		
	2024	6,807	0	24,997	0	31,804		

Land Fair Cash Val: 20,421 Building Fair Cash Val: 74,991 **Non-Farm Value: 95,412**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2000	\$79,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-407-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-407-013-00 115 PARK AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CASTLE PEGGY L

115 PARK AVE
PO BOX
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,697** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-407-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,916.80		ESTIMATED	2024 Taxes: \$ 2,140.84	
Legal Description KINCAID LTS 9 10 11 BLK 5 151799.000 2002-05305 109X210AV 12-10-G B294 P250	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,181	0	24,722	0	29,903		
	2024	5,107	0	27,590	0	32,697		

Land Fair Cash Val: 15,321 Building Fair Cash Val: 82,770 **Non-Farm Value: 98,091**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/14/2012	\$75,000	2012R05139	Yes
08/08/2024	\$47,500	2024R02327	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-407-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-407-014-00 113 PARK AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CROWDER ROBERT E

113 PARK AVE
PO BOX 781
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,750** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-407-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 142.66	ESTIMATED			2024 Taxes: \$ 140.33
Legal Description KINCAID LTS 12 & 13 BLK 5 97-02555 151801.000 88-6065 72X190AV 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,112	0	667	0	1,779		
	2024	1,093	0	657	0	1,750		

Land Fair Cash Val: 3,279 Building Fair Cash Val: 1,971 **Non-Farm Value: 5,250**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-407-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-407-015-00 101 PARK AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WOLANSKI BRIAN K & AMBER N

101 PARK AVE
PO BOX 403
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,796** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-407-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,191.48	ESTIMATED			2024 Taxes: \$ 1,266.68
Legal Description KINCAID LTS 14 15 16 17 BLK 5 98-06480 151803.000 88-1686 160X160AV 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,953	0	18,905	0	20,858		
	2024	1,923	0	19,873	0	21,796		

Land Fair Cash Val: 5,769 Building Fair Cash Val: 59,619 **Non-Farm Value: 65,388**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/15/2016	\$43,000	2016R01380	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-407-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-408-001-00 116 PARK AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ITTENBACH KIERSTIN M

Address to send notice if different than shown at left:

PO BOX 1086
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$39,996** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-408-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,600.26		ESTIMATED 2024 Taxes: \$ 2,726.15	
Legal Description KINCAID RESUB LOT30 BLK 30 MHRE 152103.000 2002-01796 200X340AV 12-10-G 97-05630	LT 21	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL
		2023	6,596	0	31,830	0	38,426
		2024	9,960	0	30,036	0	39,996

Land Fair Cash Val: 29,880 Building Fair Cash Val: 90,108 **Non-Farm Value: 119,988**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/2002	\$20,000		Yes
08/27/2021	\$120,000	2021R03679	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-408-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-409-001-00 216 EDINBURG AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HALBERT JOSEPH HENRY

216 EDINBURG AVE
PO BOX 438
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,704** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-409-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 297.02
Legal Description KINCAID LOTS 1 & 2 BLK 27 1972R04459 MHRE 164.17X101'AV & 60X182.50'AV 152080.001 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,959	0	5,091	0	10,050		
	2024	4,887	0	9,817	0	14,704		

Land Fair Cash Val: 14,661 Building Fair Cash Val: 29,451 **Non-Farm Value: 44,112**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-409-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-409-002-01 KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

VILLAGE OF KINCAID

PO BOX 615
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$0 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed breakdown table for 2023 and 2024 with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-12-10-409-002-01

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four tick marks for valuation input.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-409-003-00 800 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOLLUSKY ANTHONY F JR &
MICHELLE L

205 W HIDDEN TRL
ELKHORN WI 53121

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,123** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-409-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 838.48		ESTIMATED 2024 Taxes: \$ 891.96	
Legal Description KINCAID LT 14 BLK 27 MHRE 152080.002 98-05877 65X182AV 12-10-H 95-01185 96-05147 98-01022	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,588	0	13,868	0	16,456	
	2024	2,550	0	14,573	0	17,123	

Land Fair Cash Val: 7,650 Building Fair Cash Val: 43,719 **Non-Farm Value: 51,369**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1998	\$51,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-409-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-409-004-00 150 EDINBURG AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAVIS WILLIAM E & STACY L

150 EDINBURG AVE
PO BOX 732
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,387** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-409-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 965.82		ESTIMATED 2024 Taxes: \$ 913.13	
Legal Description KINCAID LT 1 BLK 28 MHRE 152081.002 85-8381 111X199AV 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,588	0	15,456	0	18,044	
	2024	2,550	0	14,837	0	17,387	

Land Fair Cash Val: 7,650 Building Fair Cash Val: 44,511 **Non-Farm Value: 52,161**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-409-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-409-005-00 803 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

PACKMAN DREW M

803 SUMMIT AVE
PO BOX 407
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$32,093 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 8,739 Building Fair Cash Val: 87,540 Non-Farm Value: 96,279

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount. Rows for Tax Year 2023 and 2024, both showing OWNER OCCUPD with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Rows for sales on 08/14/2, 05/17/2005, and 08/14/2017.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-409-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-409-006-00 805 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LUCAS CHAD E

805 SUMMIT AVE
PO BOX 1078
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,597** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-409-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,800.04		ESTIMATED		2024 Taxes: \$ 1,972.44
Legal Description KINCAID LOT 3 BLK 28 2003R06701 152081.003 93-04262 75X170AV 12-10-H		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	2,892	0	25,555	0	28,447	
		2024	2,850	0	27,747	0	30,597	

Land Fair Cash Val: 8,550 Building Fair Cash Val: 83,241 **Non-Farm Value: 91,791**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2003	\$57,000		Yes
05/09/2012	\$58,000	2012R02531	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-409-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-409-007-00 807 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DAVIS HOWARD J

807 SUMMIT AVE
PO BOX 1075
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$24,564 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 25,071 Building Fair Cash Val: 48,621 Non-Farm Value: 73,692

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Tax Year, Exemption History, Amount. Rows for 2023 and 2024 with exemptions: ELDERLY, OWNER OCCUPD, SEN FREEZE.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-409-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-409-009-00 SUMMIT AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF KINCAID

Address to send notice if different than shown at left:

PO BOX 615
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-409-009-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description KINCAID LTS 7 THRU 14 BLK 28 ST DOC# 89-11-2 152081.000 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-10-409-009-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-409-010-00 800 PARK AVE KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

VILLAGE OF KINCAID

Address to send notice if different than shown at left:

PO BOX 615
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$0 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-12-10-409-010-00

Required

Complainant's Estimated Correct Assessed Valuations:

Four red vertical lines for inputting assessed valuations.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-410-001-00 150 CENTER ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BURKHART GALE L

Address to send notice if different than shown at left:

1147 W COAL ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$663** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-410-001-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 40.10		ESTIMATED 2024 Taxes: \$ 53.17	
Legal Description KINCAID RESUB LOT30 BLK 30 LOTS A B 152083.000	LTS 1 & 2	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL
		2023	672	0	403	0	1,075
2000-00845 120X141AV 12-10-H 91-36075 97-04713 2000-00845		2024	663	0	0	0	663

Land Fair Cash Val: 1,989 Building Fair Cash Val: 0 **Non-Farm Value: 1,989**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	575

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-410-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-410-001-01 CENTER ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BURKHART GALE L & MARY

Address to send notice if different than shown at left:

1147 W COAL ST
TAYLORVILLE IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$570 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: RESIDENTIAL BUILDING REMOVED.

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, LOT C, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Rows for 2023 and 2024.

Land Fair Cash Val: 1,710 Building Fair Cash Val: 0 Non-Farm Value: 1,710

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-410-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-410-002-00 917 GARDEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HUGHES NEIL T

917 GARDEN ST
PO BOX 943
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,230** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-410-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 758.20	ESTIMATED			2024 Taxes: \$ 1,060.92
Legal Description KINCAID RESUB LOT30 5 BLK 30	LTS 3 4 &	YEAR 2023	HOMESITE/LOTS 2,391	FARM LAND 0	BUILDINGS 13,064	FARM BLDGS 0	TOTAL 15,455	
2004R04053 180X128.5AV 2002R08337	152086.000 12-10-H 2002R08128	2024	2,353	0	16,877	0	19,230	

Land Fair Cash Val: 7,059 Building Fair Cash Val: 50,631 **Non-Farm Value: 57,690**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2004	\$37,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-410-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-410-003-00 921 GARDEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEES GEORGE G & LUANE MARIE

923 GARDEN ST
PO BOX 1106
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,287** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-410-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,260.12		ESTIMATED		2024 Taxes: \$ 1,707.01
Legal Description KINCAID RESUB LOT30 BLK 30 99-07821 152088.000 99-07820 60X125 12-10-H 89-7814 96-01392	LT 6	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	787	0	14,927	0	15,714	
		2024	777	0	20,510	0	21,287	

Land Fair Cash Val: 2,331 Building Fair Cash Val: 61,530 **Non-Farm Value: 63,861**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-410-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-410-004-00 923 GARDEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEES GEORGE G & LUANE MARIE

923 GARDEN ST
PO BOX 1106
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,306** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-410-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID RESUB LOT30 & 8 BLK 30 152089.000 77-17936 120X125 12-10-H	LOTS 7	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	1,575	0	20,313	0	21,888	
		2024	1,553	0	23,753	0	25,306	

Land Fair Cash Val: 4,659 Building Fair Cash Val: 71,259 **Non-Farm Value: 75,918**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled 70-100% Ve	10455
	IMPROVEMENT	433
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled 70-100% Ve	14306

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-410-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-410-006-00 932 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EDWARDS COREY A

932 SPRINGFIELD RD
PO BOX 1064
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,600** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-410-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 162.96		ESTIMATED 2024 Taxes: \$ 529.26	
Legal Description KINCAID RESUB LOT30 10 BLK 30 152091.000 2004R05815 80X125 12-10-H 2004R01506	LTS 9 &	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL
		2023	1,575	0	6,457	0	8,032
		2024	1,553	0	11,047	0	12,600

Land Fair Cash Val: 4,659 Building Fair Cash Val: 33,141 **Non-Farm Value: 37,800**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2001	\$44,900		Yes
09/18/2008	\$41,900	2008R04834	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-410-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-410-007-00 928 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GRAFTON BART IV

915 SPRINGFIELD ST
PO BOX 962
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,904** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-410-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 110.26	ESTIMATED			2024 Taxes: \$ 152.68
Legal Description KINCAID RESUB LOT 30 LT 11 BLK 30 2003R04083 152093.000 98-06068 40X125 12-10-H 93-03996	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	787	0	588	0	1,375		
	2024	777	0	1,127	0	1,904		

Land Fair Cash Val: 2,331 Building Fair Cash Val: 3,381 **Non-Farm Value: 5,712**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2003	\$20,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-410-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-410-009-00 924 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

RABIDEAU ANGELENE

P O BOX
924 SPRINGFIELD ST
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$30,033 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 6,990 Building Fair Cash Val: 83,109 Non-Farm Value: 90,099

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows 6000 for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows sales from 2007 and 2015.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-410-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-410-011-00 918 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRYANT LAUREN

Address to send notice if different than shown at left:

PO BOX 137
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,010** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-410-011-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,314.32	ESTIMATED			2024 Taxes: \$ 1,364.04
Legal Description KINCAID RESUB LOT30 LTS 15 16 & 17 BLK 30 152098.000 74-12073 120X125 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,362	0	14,028	0	16,390		
	2024	2,330	0	14,680	0	17,010		

Land Fair Cash Val: 6,990 Building Fair Cash Val: 44,040 **Non-Farm Value: 51,030**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/11/2018	\$7,000	2018R01061	No
10/23/2018	\$29,000	2018R03500	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-410-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-410-013-00 912 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PERRY STEVE E

Address to send notice if different than shown at left:

912 SPRINGFIELD ST
KINCAID IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,983** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-410-013-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,755.60		ESTIMATED		2024 Taxes: \$ 1,682.63
Legal Description KINCAID RESUB LOT30 LOT 18 19 & 20 BLK 30 152101.000 2003R03732 120X125 12-10-H 2000R00845	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,068	0	25,825	0	27,893		
	2024	2,040	0	24,943	0	26,983		

Land Fair Cash Val: 6,120 Building Fair Cash Val: 74,829 **Non-Farm Value: 80,949**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1997	\$25,000		Yes
06/06/2013	\$65,000	2013R02423	Yes
09/26/2019	\$68,000	2019R03303	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-410-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-411-001-00 1101 GARDEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF KINCAID

PO BOX 615
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: A REVALUATION OF PROPERTY.


Parcel Number 15-12-10-411-001-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 116.92		ESTIMATED 2024 Taxes: \$ 0.00	
Legal Description KINCAID LTS 1 2 & 3 BLK 32 152111.000 85-9830 120X125 12-10-H ST DOC# 24-011-00008	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,458	0	0	0	1,458	
	2024	0	0	0	0	0	

15-12-10-411-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1985	\$4,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-411-002-00 1007 GARDEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCBRIDE ZACHARY & MEGAN

Address to send notice if different than shown at left:

6 WESTMINISTER DR
CHATHAM IL 62629

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$600** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-411-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 12.12		ESTIMATED 2024 Taxes: \$ 48.11	
Legal Description KINCAID LT 4 BLK 32 2003R02717 96-02790 152114.000 88-4094 40X125 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	151	0	0	0	151	
	2024	260	0	340	0	600	

Land Fair Cash Val: 780 Building Fair Cash Val: 1,020 **Non-Farm Value: 1,800**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-411-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-411-003-00 1009 GARDEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KEE CODY & NICOLE

Address to send notice if different than shown at left:

PO BOX 71
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,813** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-411-003-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 84.20		ESTIMATED 2024 Taxes: \$ 145.38	
Legal Description KINCAID LTS 5 6 7 8 9 10 & 11 BLK 32 152115.000 280X125 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,050	0	0	0	1,050	
	2024	1,813	0	0	0	1,813	

Land Fair Cash Val: 5,439 Building Fair Cash Val: 0 Non-Farm Value: 5,439

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/24/2018	\$2,500	2018R02339	No
08/12/2019	\$115,000	2019R02648	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-411-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-411-005-00 1023 GARDEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SEDLOCK GARY L

Address to send notice if different than shown at left:

PO BOX 860
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$777 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated _____
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 2,331 Building Fair Cash Val: 0 Non-Farm Value: 2,331

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-411-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-411-006-00 1015 GARDEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MANSFIELD CLIFFORD B & LINDA G

Address to send notice if different than shown at left:

1747 N 800 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,943** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-411-006-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 132.96	ESTIMATED			2024 Taxes: \$ 236.00
Legal Description KINCAID LOTS 15 THRU 27 BLK 32 152118.000 2002-01029 480X125 12-10-H 72-3175 88-477 90-03224	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,658	0	0	0	1,658		
	2024	2,943	0	0	0	2,943		

Land Fair Cash Val: 8,829 Building Fair Cash Val: 0 Non-Farm Value: 8,829

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/24/2010	\$5,000	2010R02177	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-411-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-411-007-00 1126 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SEVERNS RICHARD L

Address to send notice if different than shown at left:

7063 RAMBLEWOOD DR
ROCHESTER IL 62563

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$24,753 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 2,619 Building Fair Cash Val: 71,640 Non-Farm Value: 74,259

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-411-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-411-008-00 1122 SPRINGFIELD RD KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NEWINGHAM JOSEPH D & JULITTA S

Address to send notice if different than shown at left:

PO BOX 844
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,417** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-411-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,504.14	ESTIMATED			2024 Taxes: \$ 2,198.57
Legal Description KINCAID LTS 38 39 40 & 41 BLK 32 152149.000 94-2541 120X125 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,362	0	16,395	0	18,757		
	2024	2,330	0	25,087	0	27,417		

Land Fair Cash Val: 6,990 Building Fair Cash Val: 75,261 **Non-Farm Value: 82,251**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/03/2014	\$34,900	2014R04634	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-411-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-411-009-00 1116 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

NEWINGHAM JOSEPH D & JULITTA S

Address to send notice if different than shown at left:

PO BOX 844
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$583 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 1,749 Building Fair Cash Val: 0 Non-Farm Value: 1,749

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes red arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes entry for 07/19/2006.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-411-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-411-009-01 1108 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

ALLEN PAUL E

Address to send notice if different than shown at left:

100 E 400 NORTH RD
OCONEE

IL 62553

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$35,207 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024 valuations.

Land Fair Cash Val: 6,990 Building Fair Cash Val: 98,631 Non-Farm Value: 105,621

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?.

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-411-009-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-411-010-00 1102 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF KINCAID

115 CENTRAL AVE
PO BOX 615
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,134** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-411-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 336.48	ESTIMATED			2024 Taxes: \$ 331.51
Legal Description KINCAID LTS 47 THRU 50 BLK 32 97-05298 152159.000 86-15204 120X125 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,006	0	2,190	0	4,196		
	2024	1,977	0	2,157	0	4,134		

Land Fair Cash Val: 5,931 Building Fair Cash Val: 6,471 **Non-Farm Value: 12,402**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/1997	\$20,000		Yes
03/08/2024	\$0	2024R00617	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-411-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-411-011-00 1024 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

LLA EXPLORATION INC

Address to send notice if different than shown at left:

1747 N 800 EAST RD

TAYLORVILLE

IL 62568

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$16,036 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for Year, Homesite/Lots, Farm Land, Buildings, Farm Bldgs, and Total.

Land Fair Cash Val: 9,159 Building Fair Cash Val: 38,949 Non-Farm Value: 48,108

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Includes one row of data)

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-411-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-411-013-00 1012 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

KEE CODY & NICOLE

Address to send notice if different than shown at left:

PO BOX 71
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$39,776 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 8,769 Building Fair Cash Val: 110,559 Non-Farm Value: 119,328

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?.

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-411-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-411-014-00 1008 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCBRIDE ZACHARY & MEGAN

Address to send notice if different than shown at left:

6 WESTMINISTER DR
CHATHAM IL 62629

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,247** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-411-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,260.12		ESTIMATED		2024 Taxes: \$ 1,463.23
Legal Description KINCAID LOTS 61 62 & 63 BLK 32 152172.000 2003R02717 105X125 12-10-H 1996R02790 1988R04094	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,068	0	13,646	0	15,714		
	2024	2,040	0	16,207	0	18,247		

Land Fair Cash Val: 6,120 Building Fair Cash Val: 48,621 **Non-Farm Value: 54,741**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-411-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-411-016-00 1004 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

STIVERS SHARON

1004 SPRINGFIELD RD
PO BOX 863
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,893** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-411-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 99.68	ESTIMATED			2024 Taxes: \$ 231.99
Legal Description KINCAID LT 64 & E15 OFF E SD OF LT 65 BLK 32 98-05891 152174.000 88-1828 50X125 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	984	0	11,937	0	12,921		
	2024	970	0	12,923	0	13,893		

Land Fair Cash Val: 2,910 Building Fair Cash Val: 38,769 **Non-Farm Value: 41,679**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	IMPROVEMENT	678
2024	OWNER OCCUPD	6000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1988	\$17,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-411-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-411-017-00 100 DIVISION ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

POPE FRANKLIN D & GRACE A (LSR)
FOR RHONDA JONES (LSE)

2700 N 625 EAST RD
MECHANICSBURG IL 62545

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,964** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-411-017-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 113.80	ESTIMATED			2024 Taxes: \$ 113.79
Legal Description KINCAID W20 LT 65 & ALL LT 66 BLK 32 MHRE 2003R07168 152175.000 2002-03139 55X125 12-10-H 2000-00845 94-04600	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,082	0	4,652	0	5,734		
	2024	1,067	0	5,897	0	6,964		

Land Fair Cash Val: 3,201 Building Fair Cash Val: 17,691 **Non-Farm Value: 20,892**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 Leasehold Owner	4315
<u>Tax Year</u> 2024 Leasehold Owner	5545

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2003	\$25,000	2003R07168	Yes
05/09/2005	\$25,500	2005R02651	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-411-017-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-412-001-00 1003 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GIBSON THERESA A

1003 SPRINGFIELD AVE
PO BOX 1013
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,867** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-412-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,856.08	ESTIMATED			2024 Taxes: \$ 2,074.28
Legal Description KINCAID LTS 1 2 & W1/2 LT 3 & THE E 33' OF THE VACATED DIVISION ST 2000-00845 151853.000 86-16218 157.5X116 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,418	0	25,728	0	29,146		
	2024	3,367	0	28,500	0	31,867		

Land Fair Cash Val: 10,101 Building Fair Cash Val: 85,500 **Non-Farm Value: 95,601**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-412-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-412-002-00 1007 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HINKEL ZELMA C

1007 SPRINGFIELD AVE
PO BOX 15
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,273** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-412-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 37.94	ESTIMATED			2024 Taxes: \$ 119.96
Legal Description KINCAID E1/2 LT 3 & ALL LTS 4 5 & 6 BLK 33 151855.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
98-06042 122.5X116 12-10-H 95-04227	2023	2,657	0	14,738	0	17,395		
	2024	2,620	0	15,653	0	18,273		

Land Fair Cash Val: 7,860 Building Fair Cash Val: 46,959 **Non-Farm Value: 54,819**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	4899
	IMPROVEMENT	1023
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	5777

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-412-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-412-003-00 1013 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ALLEN PAUL E

Address to send notice if different than shown at left:

100 E 400 NORTH RD
OCONEE

IL 62553

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,636** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-412-003-00	Class 0050	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,871.96	ESTIMATED			2024 Taxes: \$ 2,216.14
Legal Description KINCAID LTS 7 8 9 10 BLK 33 95-3653 151859.000 88-2426 140X116 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,317	0	21,027	0	23,344		
	2024	2,283	0	25,353	0	27,636		

Land Fair Cash Val: 6,849 Building Fair Cash Val: 76,059 **Non-Farm Value: 82,908**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1995	\$80,000		Yes
02/18/2016	\$20,000	2016R00600	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-412-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-412-004-00 1021 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ROGGERO NANCY

Address to send notice if different than shown at left:

PO BOX 828
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$360** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-412-004-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 29.60		ESTIMATED	2024 Taxes: \$ 28.87	
Legal Description KINCAID LOT 11 BLK 33 EX BEG SW COR LOT 63 BLK 32 SELY252.99' SWLY79.72' POB SELY29.31' SWLY50.41' NWLY28.97' NELY50.44' TO POB 35X66' &	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	369	0	0	0	369		
	2024	360	0	0	0	360		

Land Fair Cash Val: 1,080 Building Fair Cash Val: 0 **Non-Farm Value: 1,080**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-412-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-412-005-00 1023 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

LLA EXPLORATION INC

Address to send notice if different than shown at left:

1747 N 800 EAST RD
TAYLORVILLE IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$7,617 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 11,220 Building Fair Cash Val: 11,631 Non-Farm Value: 22,851

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-412-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-412-006-00 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

WICKS RUTH ANN

Address to send notice if different than shown at left:

PO BOX 432
KINCAID

IL 62540

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$2,130 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 2,631 Building Fair Cash Val: 3,759 Non-Farm Value: 6,390

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-412-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-412-006-01 1028 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WICKS RUTH ANN

Address to send notice if different than shown at left:

PO BOX 432
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,313** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-412-006-01	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 106.90		ESTIMATED 2024 Taxes: \$ 105.29	
Legal Description KINCAID LOTS 53 & 54 BLK 33 2003R01803 70X116 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,333	0	0	0	1,333	
	2024	1,313	0	0	0	1,313	

Land Fair Cash Val: 3,939 Building Fair Cash Val: 0 **Non-Farm Value: 3,939**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-412-006-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-412-007-00 1022 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FEHRING RICHARD A

1016 TAYLORVILLE ST
PO BOX 886
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$440** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-412-007-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 35.52		ESTIMATED	2024 Taxes: \$ 35.28
Legal Description KINCAID LT 57 BLK 33 2003R01746 95-3098 151909.000 95-03096 35X116 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	443	0	0	0	443	
	2024	440	0	0	0	440	

Land Fair Cash Val: 1,320 Building Fair Cash Val: 0 **Non-Farm Value: 1,320**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1978	\$2,800		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-412-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-412-008-00 1020 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUSBY STEPHEN G

1020 TAYLORVILLE ST
PO BOX 1181
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,177** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-412-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 40.10	ESTIMATED			2024 Taxes: \$ 40.10
Legal Description KINCAID LT 58 BLK 33 MHRE 151910.000 97-05769 35X116 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	443	0	1,369	0	1,812		
	2024	440	0	3,737	0	4,177		

Land Fair Cash Val: 1,320 Building Fair Cash Val: 11,211 **Non-Farm Value: 12,531**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	891 421
2024	OWNER OCCUPD	3677

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/22/2006	\$7,500	2006R00811	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-412-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-412-009-00 1016 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FEHRING RICHARD A

1016 TAYLORVILLE ST
PO BOX 886
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,857** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-412-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 71.22	ESTIMATED			2024 Taxes: \$ 1,191.39
Legal Description KINCAID LTS 59 & 60 BLK 33 2003R01746 MHRE CFD 151912.000 95-3098 70X116 12-10-H 72-339	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	890	0	19,111	0	20,001		
	2024	877	0	19,980	0	20,857		

Land Fair Cash Val: 2,631 Building Fair Cash Val: 59,940 **Non-Farm Value: 62,571**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
Tax Year 2023 IMPROVEMENT	13113

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-412-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-412-010-00 1014 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

FEHRING RICHARD A

1016 TAYLORVILLE ST
PO BOX 886
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$440 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 1,320 Building Fair Cash Val: 0 Non-Farm Value: 1,320

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-412-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-412-011-00 1012 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FEHRING RICHARD A

1016 TAYLORVILLE ST
PO BOX 886
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$440** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-412-011-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 30.64		ESTIMATED		2024 Taxes: \$ 35.28
Legal Description KINCAID LT 62 BLK 33 2003R01746 2000-01399 151913.001 95-2835 35X116 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	382	0	0	0	382		
	2024	440	0	0	0	440		

Land Fair Cash Val: 1,320 Building Fair Cash Val: 0 Non-Farm Value: 1,320

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-412-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-412-012-00 1010 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

FEHRING RICHARD A

1016 TAYLORVILLE ST
PO BOX 886
KINCAID IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$403 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 1,209 Building Fair Cash Val: 0 Non-Farm Value: 1,209

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 09/01/1987, \$2,000, Yes)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-412-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-412-013-00 1006 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HINKEL ZELMA C

1007 SPRINGFIELD AVE
PO BOX 15
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$657** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-412-013-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 45.72		ESTIMATED 2024 Taxes: \$ 52.68	
Legal Description KINCAID LTS 64 & 65 BLK 33 151916.000 98-06042 70X116 12-10-H 95-04227	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	570	0	0	0	570	
	2024	657	0	0	0	657	

Land Fair Cash Val: 1,971 Building Fair Cash Val: 0 Non-Farm Value: 1,971

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-412-013-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-412-014-00 1000 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GIBSON THERESA A

1003 SPRINGFIELD ST
PO BOX 1013
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,097** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-412-014-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 58.30		ESTIMATED 2024 Taxes: \$ 87.97	
Legal Description KINCAID LTS 66 67 68 BLK 33 & THE E 33' OF THE VACATED DIVISION ST 2000-00845 151918.000 72-3252 175X116 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	727	0	0	0	727	
	2024	1,097	0	0	0	1,097	

Land Fair Cash Val: 3,291 Building Fair Cash Val: 0 Non-Farm Value: 3,291

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
05/13/2015	\$900	2015R01843	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ____ / ____ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-412-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-413-001-00 701 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

GOESCHEL ALYSHA

Address to send notice if different than shown at left:

306 S 2ND ST
TAYLORVILLE

IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$4,146 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for Year, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 3,939 Building Fair Cash Val: 8,499 Non-Farm Value: 12,438

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Includes one row of data)

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-413-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-413-002-00 801 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARAS FRANK M & RETA DM

Address to send notice if different than shown at left:

PO BOX 416
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$357** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-413-002-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 28.64		ESTIMATED 2024 Taxes: \$ 28.63	
Legal Description KINCAID LT 1 EX NWLY 145 SELY 50 NWLY245 EX 50X50TR BL 31 152105.001 72-688 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	357	0	0	0	357	
	2024	357	0	0	0	357	

Land Fair Cash Val: 1,071 Building Fair Cash Val: 0 **Non-Farm Value: 1,071**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-413-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-413-003-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF KINCAID

Address to send notice if different than shown at left:

PO BOX 615
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-413-003-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description BEG 195' SE OF W COR O LT 1 TH SE50 NE 55 NW50 SW50 TO POB WATER TOWER 50X50 83-44440	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0		
	2024	0	0	0	0	0		

15-12-10-413-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-413-004-00 915 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GRAFTON BARTHOLOMEW IV & TERRA

915 SPRINGFIELD ST
PO BOX 962
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$65,007** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-413-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 4,379.04		ESTIMATED 2024 Taxes: \$ 4,731.78	
Legal Description KINCAID SW80' LOT 5 & LOT 4 BLK 31 & BEG 202.44' SW NWCOR LOT 5 TH SE283' SW80' NW283' NE80' TO POB 152105.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	7,534	0	53,074	0	60,608	
	2024	7,427	0	57,580	0	65,007	

Land Fair Cash Val: 22,281 Building Fair Cash Val: 172,740 **Non-Farm Value: 195,021**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/07/2007	\$120,000	2007R02795	No
05/15/2015	\$120,000	2015R01896	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-413-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-413-004-01 913 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GRAFTON BARTHOLOMEW IV & TERRA

915 SPRINGFIELD ST
PO BOX 962
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,723** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-413-004-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,711.18		ESTIMATED	2024 Taxes: \$ 1,982.54	
Legal Description KINCAID LOTS 2 & 3 BLK 31 EX FOR ROUTE 104 MHRE 2000-00845 12-10-G 98-06086	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,398	0	16,941	0	21,339		
	2024	4,333	0	20,390	0	24,723		

Land Fair Cash Val: 12,999 Building Fair Cash Val: 61,170 **Non-Farm Value: 74,169**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-413-004-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-413-004-02 925 SPRINGFIELD ST

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HAASE GARY B & JANE
THE JG TRUST

140 NIATROSS CT
RENO NV 89521

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$155,860** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-413-004-02	Class 0061	Acreage 1.260	Print Date 9/23/2024	2023 Taxes: \$ 12,891.46		ESTIMATED 2024 Taxes: \$ 12,498.44	
Legal Description KINCAID LOTS 5 BLK 31 EX FOR ROUTE 104 ROW & EX BEG 33' SE TH 202.44' SW NWCOR LOT 5 TO POB TH SE283' SW80' NW283' NE80' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	30,940	0	129,821	0	160,761	
	2024	30,490	0	125,370	0	155,860	

Land Fair Cash Val: 91,470 Building Fair Cash Val: 376,110 **Non-Farm Value: 467,580**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
-----------------	--------------------------	---------------

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/15/2015	\$120,000	2015R01896	No
08/08/2018	\$1,107,792	2018R02579	No
07/15/2021	\$1,187,000	2021R02938	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-413-004-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-413-005-00 1101 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RABIDEAU JESSICA J

1101 SPRINGFIELD ST
PO BOX 1062
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,050** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-413-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 263.18	ESTIMATED			2024 Taxes: \$ 164.39
Legal Description KINCAID LTS 17 & 18 BLK 33 151868.000 2001-05024 70X116 12-10-H 97-0034 2000-00845 93-6930 95-0772 95-3363	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,677	0	7,605	0	9,282		
	2024	1,653	0	6,397	0	8,050		

Land Fair Cash Val: 4,959 Building Fair Cash Val: 19,191 **Non-Farm Value: 24,150**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/1997	\$31,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-413-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-413-006-00 1105 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HP RENTALS LLC
% RYAN PATTERSON

4669 BROOKVIEW DR
AUBURN IL 62615

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,630** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-413-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,329.96		ESTIMATED		2024 Taxes: \$ 1,493.94
Legal Description KINCAID LTS 19 20 & 21 BLK 33 151870.000 92-2288 105X116 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,666	0	13,919	0	16,585		
	2024	2,630	0	16,000	0	18,630		

Land Fair Cash Val: 7,890 Building Fair Cash Val: 48,000 **Non-Farm Value: 55,890**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1992	\$29,000		Yes
08/05/2008	\$40,000	2008R04074	Yes
12/23/2011	\$30,000	2011R06087	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-413-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-413-007-00 1111 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAMPBELL JOHN D

1111 SPRINGFIELD ST
PO BOX 1111
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-413-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 626.86	ESTIMATED			2024 Taxes: \$ 225.90
Legal Description KINCAID LTS 22 & 23 BLK 33 151873.000 86-13986 70X116 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,780	0	14,037	0	15,817		
	2024	1,753	0	14,407	0	16,160		

Land Fair Cash Val: 5,259 Building Fair Cash Val: 43,221 **Non-Farm Value: 48,480**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled Person OWNER OCCUPD	2000 6000
2024	Disabled Person OWNER OCCUPD ELDERLY SEN FREEZE	2000 6000 5000 343

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-413-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-413-008-00 1115 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CROWDER JEFF & VAUNA STAHL

1115 SPRINGFIELD ST
PO BOX 654
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,547** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-413-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 828.28	ESTIMATED			2024 Taxes: \$ 925.96
Legal Description KINCAID LOT 24 BLK 33 1982R42935 35X116' 151875.000 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	890	0	15,439	0	16,329		
	2024	877	0	16,670	0	17,547		

Land Fair Cash Val: 2,631 Building Fair Cash Val: 50,010 **Non-Farm Value: 52,641**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/11/2010	\$15,000	2010R03450	No
08/16/2010	\$49,900	2010R03516	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-413-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-413-009-00 1117 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

CROWDER JEFF & VAUNA STAHL

Address to send notice if different than shown at left:

PO BOX 654
KINCAID

IL 62540

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$6,744 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 2,631 Building Fair Cash Val: 17,601 Non-Farm Value: 20,232

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes one entry: 09/01/1992, \$8,500, Yes.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-413-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-413-010-00 1100 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOBBS FRANCIS ALAN

Address to send notice if different than shown at left:

PO BOX 235
EDINBURG

IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,143** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-413-010-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 174.34		ESTIMATED 2024 Taxes: \$ 171.85	
Legal Description KINCAID LTS 50 51 & 52 BLK 33 95-2040 151903.000 2000-00845 105X116 12-10-H 81-35669	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,174	0	0	0	2,174	
	2024	2,143	0	0	0	2,143	

Land Fair Cash Val: 6,429 Building Fair Cash Val: 0 **Non-Farm Value: 6,429**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1995	\$3,300		Yes
02/19/2021	\$40,000	2021R00646	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-413-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-414-001-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LASCELLES RONALD F

Address to send notice if different than shown at left:

4204 TUXHORN RD
SPRINGFIELD IL 62712

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,169** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-414-001-00	Class 0021	Acreage 18.000	Print Date 9/23/2024	2023 Taxes: \$ 162.64		ESTIMATED	2024 Taxes: \$ 173.93
Legal Description KINCAID OUT LOT A B & C EX .65AC & TR OUT LOT B & EX .542AC TR OF LOT B & EX PART OUT LOT C & PART OF VACATED SANGAMON AVE	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	2,028	0	0	2,028	
	2024	0	2,169	0	0	2,169	

15-12-10-414-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/23/2014	\$198,786	2014R01411	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-414-001-01 KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

VILLAGE OF KINCAID

Address to send notice if different than shown at left:

PO BOX 615
KINCAID

IL 62540

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$0 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-10-414-001-01

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four tick marks for valuation input.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-414-001-02 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LANDEN I GOUND

Address to send notice if different than shown at left:

126 E PATTERSON ST
ROODHOUSE IL 62082

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,304** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-10-414-001-02	Class 0021	Acreage 36.300	Print Date 9/23/2024	2023 Taxes: \$ 322.36		ESTIMATED	2024 Taxes: \$ 345.14
Legal Description N36.30AC OF KINCAID OUT LOT A & B EX .65AC & TR OUT LOT B & EX .542AC TR OF LOT B & PART OF VACATED SANGAMON AVE 2000R00845 152885.000 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	4,020	0	0	4,020	
	2024	0	4,304	0	0	4,304	

15-12-10-414-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Exemption History **Amount**
Tax Year

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
03/25/2020	\$150,000	2020R01080	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-414-002-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KEMMERLING MARVIN G JR

Address to send notice if different than shown at left:

PO BOX 505
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,124** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-414-002-00	Class 0061	Acreage 4.220	Print Date 9/23/2024	2023 Taxes: \$ 1,974.60	ESTIMATED			2024 Taxes: \$ 1,854.32
Legal Description KINCAID OUT LOTS PART OUT LT C 2000R00845 152886.000 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,153	0	19,471	0	24,624		
	2024	5,077	0	18,047	0	23,124		

Land Fair Cash Val: 15,231 Building Fair Cash Val: 54,141 **Non-Farm Value: 69,372**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-414-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-415-001-00 500 CENTRAL AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DELAY KENT

Address to send notice if different than shown at left:

901 PERRY ST
PALMER

IL 62556

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,333** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-415-001-00	Class 0040	Acreage 0.230	Print Date 9/23/2024	2023 Taxes: \$ 358.14	ESTIMATED			2024 Taxes: \$ 267.27
Legal Description 100X100 SE COR CENTRAL AVE & C&IM RY 150120.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
100X100 12-10-G	2023	2,268	0	2,198	0	4,466		
	2024	2,237	0	1,096	0	3,333		

Land Fair Cash Val: 6,711 Building Fair Cash Val: 3,288 **Non-Farm Value: 9,999**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/23/2017	\$10,000	2017R03824	No
01/06/2020	\$11,000	2020R00050	No
03/18/2022	\$10,000	2022R00992	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-10-415-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-415-002-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF KINCAID

PO BOX 615
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-10-415-002-00	Class 9900	Acreage 6.250	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description RESERVOIR 6.25A PARK ST DOC# 85-11-282 150119.001 12-10-G	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-10-415-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-415-003-00 KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MICHEL ROBERT

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$5,681 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-12-10-415-003-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-501-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ILLINOIS & MIDLAND RR INC

STE 300
200 MERIDIAN CENTRE BLVD
ROCHESTER NY 14618

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-501-001-00	Class 5100	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 3,279.86		ESTIMATED	2024 Taxes: \$ 7,211.58
Legal Description TRACK 1.08 MILE STATE ASSESS 155100CIM.005 96-00807	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-10-501-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-10-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LLA EXPLORATION INC

Address to send notice if different than shown at left:

1747 N 800 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$640** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-10-700-001-00	Class 7100	Acreage 640.000	Print Date 9/23/2024	2023 Taxes: \$ 47.22		ESTIMATED	2024 Taxes: \$ 47.22
Legal Description COAL & MINERAL RIGHTS UNDERLY ALL SEC 10 640.00AC MINED OUT 157711.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	640	0	640	
	2024	0	0	640	0	640	

15-12-10-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-11-300-001-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LASCELLES RONALD F TRUST

Address to send notice if different than shown at left:

4204 TUXHORN RD
SPRINGFIELD IL 62712

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,518** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-11-300-001-00	Class 0021	Acreage 16.500	Print Date 9/23/2024	2023 Taxes: \$ 102.50		ESTIMATED	2024 Taxes: \$ 112.01
Legal Description S16.50A SE1/4 SW1/4 150122.000 96-04154 95-02351	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	1,389	0	0	1,389	
	2024	0	1,518	0	0	1,518	

15-12-11-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
04/23/2014	\$198,786	2014R01411	No
03/22/2021	\$40,600	2021R01147	No

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials

_____ \$ _____ \$ _____

Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-11-300-001-01 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LANDEN I GOUND

Address to send notice if different than shown at left:

126 E PATTERSON ST
ROODHOUSE IL 62082

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,173** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-11-300-001-01	Class 0021	Acreage 89.250	Print Date 9/23/2024	2023 Taxes: \$ 699.04		ESTIMATED	2024 Taxes: \$ 750.62
Legal Description 89.25 OF SW1/4 SEC11 150122.000 96-04154 95-02351	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	9,474	0	0	9,474	
	2024	0	10,173	0	0	10,173	

15-12-11-300-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
03/25/2020	\$150,000	2020R01080	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-11-300-001-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GROUND RICKEY L

Address to send notice if different than shown at left:

464 E WHITE HALL RD
WHITE HALL IL 62092

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,591** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-11-300-001-02	Class 0021	Acreage 14.500	Print Date 9/23/2024	2023 Taxes: \$ 109.06		ESTIMATED		2024 Taxes: \$ 117.39
Legal Description E14.50A NE1/4 SW1/4 150122.000 96-04154 95-02351		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	1,478	0	0	1,478	
		2024	0	1,591	0	0	1,591	

15-12-11-300-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/22/2021	\$40,600	2021R01147	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-11-300-002-00 KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

LASCELLES RONALD F TRUST

Address to send notice if different than shown at left:

4204 TUXHORN RD
SPRINGFIELD IL 62712

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$3,495 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-12-11-300-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 04/23/2014, \$198,786, 2014R01411, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-11-301-002-00 175 N MINE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SELZER LOUIS E

Address to send notice if different than shown at left:

PO BOX 696
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$800** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-11-301-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 45.80		ESTIMATED 2024 Taxes: \$ 64.15	
Legal Description KINCAID LOTS 28 29 & 30 BLK 32 115.25X129.81AV 152140.000 72-2471 12-11-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	427	0	144	0	571	
	2024	423	0	377	0	800	

Land Fair Cash Val: 1,269 Building Fair Cash Val: 1,131 **Non-Farm Value: 2,400**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-11-301-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-11-301-004-00 101 N MINE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SELZER LOUIS E

Address to send notice if different than shown at left:

PO BOX 696
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,123** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-11-301-004-00	Class 0540	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 411.94	ESTIMATED			2024 Taxes: \$ 1,174.14
Legal Description KINCAID LOTS 31 32 & 33 BLK 32 152142.000 104X125 12-11-E MINE SUBSIDENCE	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,047	0	18,162	0	20,209		
	2024	2,020	0	24,103	0	26,123		

Land Fair Cash Val: 6,060 Building Fair Cash Val: 72,309 **Non-Farm Value: 78,369**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	4072
2024	OWNER OCCUPD	6000
	IMPROVEMENT	5481

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-11-301-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-11-301-006-00 1130 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SEVERNS RICHARD L

Address to send notice if different than shown at left:

7063 RAMBLEWOOD DR
ROCHESTER IL 62563

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,770** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-11-301-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,553.94	ESTIMATED			2024 Taxes: \$ 1,665.55
Legal Description KINCAID LOTS 34 & 35 & E15 LOT 36 BLK 32 2000-00665 152145.000 2000-00664 75X125 12-11-E 78-18625 86-16141	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,477	0	17,901	0	19,378		
	2024	1,457	0	19,313	0	20,770		

Land Fair Cash Val: 4,371 Building Fair Cash Val: 57,939 **Non-Farm Value: 62,310**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-11-301-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-11-302-001-00 1201 GARDEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAUM GARY G SR TRUSTEE

1208 SPRINGFIELD ST
PO BOX 375
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,666** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-11-302-001-00	Class 0040	Acreage 1.170	Print Date 9/23/2024	2023 Taxes: \$ 176.10	ESTIMATED			2024 Taxes: \$ 213.79
Legal Description KINCAID LTS 1 THRU 11 BLK 34 152177.000 88-2060 385X133AV 12-11-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	629	0	1,567	0	2,196		
	2024	1,123	0	1,543	0	2,666		

Land Fair Cash Val: 3,369 Building Fair Cash Val: 4,629 **Non-Farm Value: 7,998**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1988	\$5,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-11-302-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-11-302-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAUM GARY G SR TRUSTEE

1208 SPRINGFIELD ST
PO BOX 375
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$320** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-11-302-001-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 18.20		ESTIMATED 2024 Taxes: \$ 25.66	
Legal Description KINCAID LOT 12 BLK 34 94-06290 152177.001 96-07096 35X136 12-11-E	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	132	0	95	0	227	
	2024	237	0	83	0	320	

Land Fair Cash Val: 711 Building Fair Cash Val: 249 **Non-Farm Value: 960**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/14/2013	\$35,000	2013R03635	No
09/03/2021	\$35,000	2021R03814	No
06/16/2022	\$35,000	2022R02236	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-11-302-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-11-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-11-700-001-00	Class 7100	Acreage 160.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING SW1/4 TOTAL 160.00 ACRES MINED OUT 157712.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-12-11-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-100-002-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LASCELLES RONALD F TRUST

Address to send notice if different than shown at left:

4204 TUXHORN RD
SPRINGFIELD IL 62712

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,179** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-100-002-00	Class 0021	Acreage 34.140	Print Date 9/23/2024	2023 Taxes: \$ 214.80		ESTIMATED 2024 Taxes: \$ 234.56	
Legal Description NE1/4 NW1/4 LY N OF ROUTE 104 150124.001 96-04154 95-02351	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	2,911	0	0	2,911	
	2024	0	3,179	0	0	3,179	

15-12-14-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/23/2014	\$198,786	2014R01411	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-100-003-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAVIS CHAD E & ALISHA D

Address to send notice if different than shown at left:

4236 IRWIN BRIDGE RD
CANTRALL IL 62625

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$60,547** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-100-003-00	Class 0020	Acreage 78.263	Print Date 9/23/2024	2023 Taxes: \$ 2,472.76		ESTIMATED		2024 Taxes: \$ 4,467.47
Legal Description S27.50A SW1/4 NW1/4 & SE1/4 NW EX R/W RY & EX S275 E860 S OF RY & PART NW/14 NW1/4 LY S OF C& IM RAILROAD RIGHTWAY 199R01860 150125.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	33,513	0	0	0	33,513		
	2024	60,547	0	0	0	60,547		

Land Fair Cash Val: 181,641 Building Fair Cash Val: 0 **Non-Farm Value: 181,641**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/28/2012	\$475,000	2012R07081	No
10/31/2022	\$500,000	2022R03996	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-100-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-100-006-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GRACE MICHAEL P

Address to send notice if different than shown at left:

PO BOX 748
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,677** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-100-006-00	Class 0061	Acreage 4.712	Print Date 9/23/2024	2023 Taxes: \$ 644.90		ESTIMATED 2024 Taxes: \$ 1,658.09	
Legal Description BEG SW COR NW1/4 NW1/4 N295.50' E563.49' S364.34' W563.49' N68.84' TO THE POB 1995R00216 1976R10320 150129.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,193	0	5,849	0	8,042	
	2024	9,937	0	10,740	0	20,677	

Land Fair Cash Val: 29,811 Building Fair Cash Val: 32,220 **Non-Farm Value: 62,031**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-100-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-100-006-01 324 EAST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MULLINS AUTO PARTS & SALVAG

Address to send notice if different than shown at left:

5733 OLD ROUTE 66
MOUNT OLIVE IL 62069

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,216** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-100-006-01	Class 0061	Acreage 4.000	Print Date 9/23/2024	2023 Taxes: \$ 670.32	ESTIMATED			2024 Taxes: \$ 2,583.41
Legal Description BEG SW COR NW1/4 NW1/4 N295.50' N488.03' SELY669.63' S130.42' W563.49' 2003R04217 1994R06930	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,696	0	4,663	0	8,359		
	2024	13,363	0	18,853	0	32,216		

Land Fair Cash Val: 40,089 Building Fair Cash Val: 56,559 **Non-Farm Value: 96,648**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-100-006-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-101-002-00 1202 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAUM GARY G SR TRUSTEE

1208 SPRINGFIELD ST
PO BOX 375
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,333** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-101-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,225.00	ESTIMATED			2024 Taxes: \$ 1,389.94
Legal Description KINCAID LOTS 38 39 40 & 41 BLK 34 1994R04496 152197.000 95-05802 120X141.6AV 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,518	0	12,758	0	15,276		
	2024	2,480	0	14,853	0	17,333		

Land Fair Cash Val: 7,440 Building Fair Cash Val: 44,559 **Non-Farm Value: 51,999**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-101-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-101-003-00 1208 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAUM GARY G SR TRUSTEE

1208 SPRINGFIELD ST
PO BOX 375
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,883** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-101-003-00	Class 0060	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,232.60	ESTIMATED			2024 Taxes: \$ 1,510.62
Legal Description KINCAID LTS 34 35 36 37 BLK 34 85-9739 152195.000 80-33667 120X146 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,694	0	25,722	0	27,416		
	2024	1,670	0	29,213	0	30,883		

Land Fair Cash Val: 5,010 Building Fair Cash Val: 87,639 **Non-Farm Value: 92,649**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	IMPROVEMENT	1045
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	IMPROVEMENT	1045

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-101-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-101-005-00 1216 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAUM GARY G SR TRUSTEE

1208 SPRINGFIELD ST
PO BOX 375
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,347** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-101-005-00	Class 0061	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 37.86	ESTIMATED			2024 Taxes: \$ 268.40
Legal Description KINCAID LOTS 29 30 31 32 33 BLK 34 152189.000 85-9739 127X134AV 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	472	0	0	0	472		
	2024	850	0	2,497	0	3,347		

Land Fair Cash Val: 2,550 Building Fair Cash Val: 7,491 **Non-Farm Value: 10,041**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-101-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-101-006-00 1228 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAUM GARY G SR TRUSTEE

1208 SPRINGFIELD ST
PO BOX 375
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,307** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-101-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,019.70		ESTIMATED 2024 Taxes: \$ 1,307.66	
Legal Description KINCAID LOTS 27 & 28 BLK 34 94-06290 152185.000 96-07096 60X129AV 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,194	0	11,522	0	12,716	
	2024	1,177	0	15,130	0	16,307	

Land Fair Cash Val: 3,531 Building Fair Cash Val: 45,390 **Non-Farm Value: 48,921**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/14/2013	\$35,000	2013R03635	No
09/03/2021	\$35,000	2021R03814	No
06/16/2022	\$35,000	2022R02236	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-101-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-101-007-00 1232 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DURAN CLAIRE M

Address to send notice if different than shown at left:

PO BOX 904
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,604** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-101-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,681.36		ESTIMATED		2024 Taxes: \$ 1,732.43
Legal Description KINCAID LOTS 22 THRU 26 BLK 34 152183.000 73-6581 150X117AV 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,859	0	26,108	0	28,967		
	2024	2,817	0	26,787	0	29,604		

Land Fair Cash Val: 8,451 Building Fair Cash Val: 80,361 **Non-Farm Value: 88,812**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000
Disabled Person	2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/16/2018	\$83,500	2018R01544	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-101-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-101-008-00 1240 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAVIS ROBERT E

1240 SPRINGFIELD ST
PO BOX 1033
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,440** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-101-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,321.78	ESTIMATED			2024 Taxes: \$ 1,799.47
Legal Description KINCAID LOTS 20 & 21 BLK 34 MHRE 152179.000 2001-01326 60X97AV 12-14-A 95-05613	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,042	0	21,441	0	22,483		
	2024	1,027	0	27,413	0	28,440		

Land Fair Cash Val: 3,081 Building Fair Cash Val: 82,239 **Non-Farm Value: 85,320**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1995	\$15,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-101-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-101-009-00 1244 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DALE A & JULIE A TRUST

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,527** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-101-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 181.64		ESTIMATED 2024 Taxes: \$ 282.83	
Legal Description KINCAID LOTS 17 18 19 BLK 34 152177.017 91-00010 12-14-A 74-13160 .72 ACRE	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	607	0	1,658	0	2,265	
	2024	2,027	0	1,500	0	3,527	

Land Fair Cash Val: 6,081 Building Fair Cash Val: 4,500 **Non-Farm Value: 10,581**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-101-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-101-010-00 1225 GARDEN ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DURAN CLAIRE M

Address to send notice if different than shown at left:

PO BOX 904
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$907** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-14-101-010-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 40.74		ESTIMATED 2024 Taxes: \$ 72.73	
Legal Description KINCAID LOTS 13 14 15 & 16 BLK 34 152177.012 73-6581 140X126AV 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	508	0	0	0	508	
	2024	907	0	0	0	907	

Land Fair Cash Val: 2,721 Building Fair Cash Val: 0 **Non-Farm Value: 2,721**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/16/2018	\$83,500	2018R01544	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-101-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-102-001-00 1223 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WISE ROGER A

1223 SPRINGFIELD ST
PO BOX 601
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,946** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-102-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 478.10	ESTIMATED			2024 Taxes: \$ 478.09
Legal Description KINCAID BLK 36 EX 314 SQ FT HD RD 2002-01658 152223.000 98-01587 136X146X106 12-14-A 89-07626	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	713	0	18,607	0	19,320		
	2024	703	0	20,243	0	20,946		

Land Fair Cash Val: 2,109 Building Fair Cash Val: 60,729 **Non-Farm Value: 62,838**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	2358
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	3984

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/2002	\$57,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-102-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-103-001-00 102 N CIRCLE PL KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WEDDLE ENES ANNE

102 N CIRCLE PL
PO BOX 106
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,330** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-103-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 858.28	ESTIMATED			2024 Taxes: \$ 1,068.94
Legal Description KINCAID LOTS 9 10 11 BLK 37 152232.000 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,207	0	19,496	0	21,703		
	2024	2,173	0	22,157	0	24,330		

Land Fair Cash Val: 6,519 Building Fair Cash Val: 66,471 **Non-Farm Value: 72,990**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY OWNER OCCUPD	5000 6000
2024	ELDERLY OWNER OCCUPD	5000 6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-103-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-103-002-00 1300 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EMERSON COLE

PO BOX 653
1300 SPRINGFIELD ST
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,333** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-103-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 702.32	ESTIMATED			2024 Taxes: \$ 267.27
Legal Description KINCAID W80 LT 12 BLK 37 LY N OF ROUTE 104 152233.000 90-05149 80X150 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,456	0	13,302	0	14,758		
	2024	1,433	0	7,900	0	9,333		

Land Fair Cash Val: 4,299 Building Fair Cash Val: 23,700 **Non-Farm Value: 27,999**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1982	\$35,000		Yes
09/24/2021	\$37,000	2021R04099	Yes
04/13/2023	\$28,000	2023R00969	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-103-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-103-003-00 1308 SPRINGFIELD RD KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VAN FOSSAN KAREN S &
ERIC VALLE

PO BOX 168
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,633** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-103-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 508.50		ESTIMATED 2024 Taxes: \$ 1,253.61	
Legal Description KINCAID LOT 12 EX W80 & EX E32 LY N RT 104 BLK 37 152235.001 2001-04175 88X120 12-14-A 90-05971	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,452	0	4,889	0	6,341	
	2024	1,430	0	14,203	0	15,633	

Land Fair Cash Val: 4,290 Building Fair Cash Val: 42,609 **Non-Farm Value: 46,899**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/29/2021	\$15,000	2021R02639	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-103-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-103-004-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VAN FOSSAN KAREN S &
ERIC VALLE

PO BOX 108
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,703** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-103-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 73.22		ESTIMATED 2024 Taxes: \$ 537.51	
Legal Description KINCAID E32' LOT 12 BLK 37 & VACATED ALLEY & LOTS 13 TO 16 LY N ROUTE 104 152234.000 99-04376 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	913	0	0	0	913	
	2024	1,903	0	4,800	0	6,703	

Land Fair Cash Val: 5,709 Building Fair Cash Val: 14,400 **Non-Farm Value: 20,109**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/1999	\$1,000		Yes
06/29/2021	\$15,000	2021R02639	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-103-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-103-005-00 100 N CIRCLE PL KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WEDDLE ENES ANNE

102 N CIRCLE PL
PO BOX 106
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$277** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-103-005-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 22.21
Legal Description KINCAID LT 8 BLK 37 EX 6907 SQ FT HD RD 152231.000 84-4800 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	11	0	0	0	11	
	2024	277	0	0	0	277	

Land Fair Cash Val: 831 Building Fair Cash Val: 0 Non-Farm Value: 831

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-103-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-104-001-00 1201 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ALLEN PAUL E

100 E 400 NORTH RD
OCONEE IL 62553

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,890** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-104-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,351.20	ESTIMATED			2024 Taxes: \$ 1,434.60
Legal Description KINCAID LOTS 1 2 & 3 BLK 35 EX HD RD BK142 PG151 152200.000 105X94AV 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,400	0	14,450	0	16,850		
	2024	2,363	0	15,527	0	17,890		

Land Fair Cash Val: 7,089 Building Fair Cash Val: 46,581 **Non-Farm Value: 53,670**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/25/2008	\$60,000	2008R05936	No
09/02/2009	\$39,000	2009R05113	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-104-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-104-003-00 1213 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

O DELL MICHAEL W & LINDA

Address to send notice if different than shown at left:

PO BOX 443
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,787** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-104-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 943.20	ESTIMATED			2024 Taxes: \$ 943.20
Legal Description KINCAID LOTS 4, 5, 6, 7 & 8 BLK 35 EX 1450 SQ FT HD RD 1977R14560 175X94' 152207.000 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,996	0	24,525	0	28,521		
	2024	3,940	0	30,847	0	34,787		

Land Fair Cash Val: 11,820 Building Fair Cash Val: 92,541 **Non-Farm Value: 104,361**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	5759
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	12025

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-104-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-104-004-00 1217 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCHATTON GARRED & JODY

Address to send notice if different than shown at left:

PO BOX 1138
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,560** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-104-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 194.62	ESTIMATED			2024 Taxes: \$ 205.29
Legal Description KINCAID LOTS 9 & 10 EX HD RD & ALL LT 11 BLK 35 1219 1221 96-04370 152208.000 83-46489 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,427	0	0	0	2,427		
	2024	2,390	0	170	0	2,560		

Land Fair Cash Val: 7,170 Building Fair Cash Val: 510 **Non-Farm Value: 7,680**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
11/21/2017	\$6,000	2017R04196	No
04/27/2020	\$8,000	2020R01411	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-104-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-104-005-00 105 S CIRCLE PL KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MCHATTON GARRED & JODY

105 S CIRCLE PL
PO BOX 1138
KINCAID

IL 62540

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$45,813 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 10,329 Building Fair Cash Val: 127,110 Non-Farm Value: 137,439

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows 2023 and 2024 exemptions for OWNER OCCUPD at 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows a sale on 11/01/2003 for \$115,500, qualified.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-104-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-104-006-00 1212 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KOCUREK SUSAN E & MARK S

1212 TAYLORVILLE ST
PO BOX 48
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,863** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-104-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,242.28	ESTIMATED			2024 Taxes: \$ 2,265.37
Legal Description KINCAID LOTS 16 17 18 & 19 BLK 35 2000-03686 152216.000 140X125 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,676	0	30,899	0	34,575		
	2024	3,623	0	31,240	0	34,863		

Land Fair Cash Val: 10,869 Building Fair Cash Val: 93,720 **Non-Farm Value: 104,589**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 613
2024	OWNER OCCUPD IMPROVEMENT	6000 613

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2000	\$55,000		Yes
08/08/2007	\$45,000	2007R03889	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-104-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-104-007-00 1204 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ALLEN PAUL E

Address to send notice if different than shown at left:

100 E 400 NORTH RD
OCONEE

IL 62553

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,337** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-104-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 271.68		ESTIMATED 2024 Taxes: \$ 267.59	
Legal Description KINCAID LOTS 20 21 & 22 BLK 35 152220.000 105X125 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,756	0	632	0	3,388	
	2024	2,717	0	620	0	3,337	

Land Fair Cash Val: 8,151 Building Fair Cash Val: 1,860 **Non-Farm Value: 10,011**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/25/2008	\$60,000	2008R05936	No
09/02/2009	\$39,000	2009R05113	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-104-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-104-008-00 1200 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAUM GARY G SR TRUSTEE

1208 SPRINGFIELD ST
PO BOX 375
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$440** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-104-008-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 35.94		ESTIMATED 2024 Taxes: \$ 35.28	
Legal Description KINCAID LOT 23 BLK 35 152222.000 81-36127 35X125 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	448	0	0	0	448	
	2024	440	0	0	0	440	

Land Fair Cash Val: 1,320 Building Fair Cash Val: 0 **Non-Farm Value: 1,320**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-104-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-105-001-00 100 S CIRCLE PL KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SNYDER GLENN A

Address to send notice if different than shown at left:

1217 W SPRESSER ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,330** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-105-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 420.12	ESTIMATED			2024 Taxes: \$ 417.71
Legal Description KINCAID N1/2 LOT 5 & ALL LOT 6 BLK 37 EX FOR HD RD 2000-05608 152230.000 94-2913 48X205 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,903	0	9,336	0	11,239		
	2024	1,873	0	31,457	0	33,330		

Land Fair Cash Val: 5,619 Building Fair Cash Val: 94,371 **Non-Farm Value: 99,990**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD IMPROVEMENT	6000 22121

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/01/2000	\$33,000		Yes
02/24/2021	\$32,500	2021R00735	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-105-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-105-002-00 104 S CIRCLE PL KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FOSTER SHAUN &
MONICA SCHLEYHAHN
104 S CIRCLE PL
PO BOX 975
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,560** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-14-105-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,031.46	ESTIMATED			2024 Taxes: \$ 2,370.42
Legal Description KINCAID LOTS 1 2 3 4 & S1/2 LT 5 BLK 37 152227.000 2002-07588 12-14-A 81-38689	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,753	0	26,580	0	31,333		
	2024	4,683	0	30,877	0	35,560		

Land Fair Cash Val: 14,049 Building Fair Cash Val: 92,631 **Non-Farm Value: 106,680**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/16/2010	\$80,500	2010R02995	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-105-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-105-003-00 1300 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CIMA MICHAEL DAVID

Address to send notice if different than shown at left:

PO BOX 1101
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,437** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-105-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,589.62		ESTIMATED	2024 Taxes: \$ 1,638.85	
Legal Description KINCAID LOT 29 BLK 37 2001R02073 209X228' 152252.000 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,683	0	24,140	0	30,823		
	2024	6,587	0	24,850	0	31,437		

Land Fair Cash Val: 19,761 Building Fair Cash Val: 74,550 **Non-Farm Value: 94,311**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/2001	\$66,000		Yes
07/28/2008	\$75,000	2008R03907	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-105-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-105-004-00 1320 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FREESTON RICHARD & DEBORAH

PO BOX 671
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$34,506** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-105-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description KINCAID PART OF LTS 15 16 & ALL OF LOTS 17 18 19 20 21 22 23 24 25 26 27 & 28 BLK 37 & PART OF OUT LT E LYING S OF IL RTE 104 & PART OF VACATED ALLEY MHRE	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,916	0	22,413	0	30,329		
	2024	7,803	0	26,703	0	34,506		

Land Fair Cash Val: 23,409 Building Fair Cash Val: 80,109 **Non-Farm Value: 103,518**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Disabled 70-100% Ve	13646
	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	5683
2024	Disabled 70-100% Ve	13646
	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	9860

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/18/2018	\$1,200	2018R03451	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-105-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-106-001-00 1245 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DALE A & JULIE TRUST

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,827** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-106-001-00	Class 0011	Acreage 3.830	Print Date 9/23/2024	2023 Taxes: \$ 1,263.48		ESTIMATED		2024 Taxes: \$ 1,349.36
Legal Description KINCAID OUT LOTS PT OF OUT LOT E LYING N OF IL RTE 104 152888.000 12-14-A	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,057	0	11,699	0	15,756		
	2024	3,023	1,857	11,947	0	16,827		

15-12-14-106-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
10/18/2018	\$1,200	2018R03451	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-200-001-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LASCELLES RONALD F TRUST

Address to send notice if different than shown at left:

4204 TUXHORN RD
SPRINGFIELD IL 62712

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$997** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-200-001-00	Class 0021	Acreage 10.000	Print Date 9/23/2024	2023 Taxes: \$ 67.88		ESTIMATED		2024 Taxes: \$ 73.56
Legal Description W10.00AC NW1/4 NE1/4 150124.000 96-04154 95-02351		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	920	0	0	920	
		2024	0	997	0	0	997	

15-12-14-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/23/2014	\$198,786	2014R01411	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-200-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WISE ROGER A & VERNON A

404 COMMONWEALTH AVE
PO BOX 658
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,513** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-200-001-01	Class 2028	Acreage 31.940	Print Date 9/23/2024	2023 Taxes: \$ 269.10		ESTIMATED	2024 Taxes: \$ 480.56
Legal Description E3/4 NW1/4 NE1/4 & SW1/4 NE1/4 LYING NORTHERLY RIGHT OF WAY LINE OF STATE ROUTE 104 2003R09417 98-02658 98-02657 96-05712	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,647	0	0	0	3,647	
	2024	6,513	0	0	0	6,513	

15-12-14-200-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-200-002-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GETZ KELLY L & KATHERINE A TRUSTEES

Address to send notice if different than shown at left:

9498 CASCADE RD
ROCHESTER IL 62563

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,168** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-200-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 603.64		ESTIMATED 2024 Taxes: \$ 676.46	
Legal Description NE1/4 NE1/4 150123.000 65-174906	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	8,181	0	0	8,181	
	2024	0	9,168	0	0	9,168	

15-12-14-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/30/2014	\$246,400	2014R03984	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-200-003-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRIPLE H INC

1454 N 775 EAST RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,483** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-200-003-00	Class 0020	Acreage 34.168	Print Date 9/23/2024	2023 Taxes: \$ 186.10		ESTIMATED		2024 Taxes: \$ 183.21
Legal Description S1/2 NE1/4 LY S C&IM RAILROAD & E OF SOUTH FORK SANGAMON RIVER & THAT PART E1/2 NW1/4 99-01860 BETWEEN ROUTE 104 & C & I M	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,522	0	0	0	2,522		
	2024	2,483	0	0	0	2,483		

Land Fair Cash Val: 7,449 Building Fair Cash Val: 0 Non-Farm Value: 7,449

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/20/2012	\$200,000	2012R03353	No
06/20/2012	\$200,000	2012R03354	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-200-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-200-003-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WYZARD JEDIDIAH

PO BOX 472
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,827** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-200-003-01	Class 0020	Acreage 3.720	Print Date 9/23/2024	2023 Taxes: \$ 586.30		ESTIMATED		2024 Taxes: \$ 577.52
Legal Description E1/2 S1/2 NE1/4 LY NORTHERLY RIGHT OF WAY LINE ROUTE 104 EX FOR 4.19AC 96-04869 95-02351	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,946	0	0	0	7,946		
	2024	7,827	0	0	0	7,827		

Land Fair Cash Val: 23,481 Building Fair Cash Val: 0 **Non-Farm Value: 23,481**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/29/2005	\$36,000	2005R02472	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-200-003-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-200-003-02 791 E IL RTE 104 TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BARLOW RONALD G

Address to send notice if different than shown at left:

1029 E FRANKLIN ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$72,826** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-200-003-02	Class 0010	Acreage 4.190	Print Date 9/23/2024	2023 Taxes: \$ 3,245.88		ESTIMATED 2024 Taxes: \$ 4,561.84	
Legal Description BEG NE COR SE 1/4 NE 1/4 W 296.07' POB SWLY 346.81' W 100.02' W 498.11' W 242.35' N 92.78' E 1054.34 TO BEG 2002R04252 2001R08342 1998R04593	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	13,968	0	41,023	0	54,991	
	2024	13,763	0	59,063	0	72,826	

Land Fair Cash Val: 41,289 Building Fair Cash Val: 177,189 **Non-Farm Value: 218,478**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/14/2006	\$130,000	2006R03948	No
12/02/2021	\$218,500	2021R05085	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-200-003-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-200-003-03

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAVIS CHAD E & ALISHA D

Address to send notice if different than shown at left:

4236 IRWIN BRIDGE RD
CANTRALL IL 62625

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,473** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-200-003-03	Class 0020	Acreage 14.830	Print Date 9/23/2024	2023 Taxes: \$ 937.30		ESTIMATED 2024 Taxes: \$ 846.54	
Legal Description PART SW1/4 NE1/4 LY S OF SOUTHERLY ROW LINE CHICAGO & ILLINOIS MIDLAND RR & W OF SOUTH FORK & SANGAMON	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	12,703	0	0	0	12,703	
	2024	11,473	0	0	0	11,473	

Land Fair Cash Val: 34,419 Building Fair Cash Val: 0 **Non-Farm Value: 34,419**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/28/2012	\$475,000	2012R07081	No
10/31/2022	\$500,000	2022R03996	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-200-003-03

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-300-001-00 721 E 1500 NORTH RD KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DAVIS CHAD E & ALISHA D

Address to send notice if different than shown at left:

4236 IRWIN BRIDGE RD
CANTRALL IL 62625

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$82,310 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 245,400 Building Fair Cash Val: 1,530 Non-Farm Value: 246,930

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Date Sold, Sale Price, Doc#, Qualified? (Sales History)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-300-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-300-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LLA EXPLORATION INC

Address to send notice if different than shown at left:

1747 N 800 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,170** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-300-001-01	Class 0083	Acreage 4.300	Print Date 9/23/2024	2023 Taxes: \$ 298.68		ESTIMATED		2024 Taxes: \$ 307.68
Legal Description S433 N508 W433 N1/2 SW1/4 99-07907 95-04242 95-03964	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,048	0	0	0	4,048		
	2024	4,170	0	0	0	4,170		

Land Fair Cash Val: 12,510 Building Fair Cash Val: 0 **Non-Farm Value: 12,510**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
06/12/2009	\$21,000	2009R03471	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-300-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-300-002-00 1512 N 700 EAST RD KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREENLEAF STERLING

Address to send notice if different than shown at left:

1512 N 700 EAST RD
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,710** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-300-002-00	Class 0010	Acreage 4.010	Print Date 9/23/2024	2023 Taxes: \$ 350.04		ESTIMATED	2024 Taxes: \$ 350.04
Legal Description SW1/4 SW1/4 BEG SW COR N570.87' TO POB THENCE E608.23' N287.28' W608.00' S287.13' TO POB MHRE 150130.003 83-48052	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	9,331	0	8,618	0	17,949	
	2024	9,437	0	7,273	0	16,710	

Land Fair Cash Val: 28,311 Building Fair Cash Val: 21,819 **Non-Farm Value: 50,130**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	2205
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	966

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/27/2022	\$2,200	2022R02367	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-300-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-300-003-00 1502 N 700 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MENOSSI DAVID L & CHERYL K

Address to send notice if different than shown at left:

1502 N 700 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$75,357** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-300-003-00	Class 0010	Acreage 6.000	Print Date 9/23/2024	2023 Taxes: \$ 3,592.32		ESTIMATED		2024 Taxes: \$ 4,661.16
Legal Description SW1/4 SW1/4 BEG SW COR N570.87' E608.23' S71.64' W171.24' S499.00' W436.89' TO POB 1983R45665 MHRE 150130.004	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	15,992	0	44,879	0	60,871		
	2024	16,177	0	59,180	0	75,357		

Land Fair Cash Val: 48,531 Building Fair Cash Val: 177,540 **Non-Farm Value: 226,071**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	IMPROVEMENT	1185
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	IMPROVEMENT	1185

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/27/2022	\$2,200	2022R02367	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-300-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-300-004-00 719 E 1500 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION RICHARD A & RONDA K

719 E 1500 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$66,240** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-300-004-00	Class 0010	Acreage 15.980	Print Date 9/23/2024	2023 Taxes: \$ 3,491.96		ESTIMATED	2024 Taxes: \$ 3,869.96
Legal Description S26AC SW1/4 SW1/4 EX BG SW COR N857.81 E608 S358.92 W171 S499 W437 150130.002 94-02619	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	16,727	0	44,390	0	61,117	
	2024	16,487	0	49,753	0	66,240	

Land Fair Cash Val: 49,461 Building Fair Cash Val: 149,259 **Non-Farm Value: 198,720**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 7791
2024	OWNER OCCUPD IMPROVEMENT	6000 7791

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1994	\$25,000		Yes
03/01/2019	\$130,000	2019R00632	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-300-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-300-005-00 1500 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH FARMS

Address to send notice if different than shown at left:

PO BOX 554
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,275** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-14-300-005-00	Class 0021	Acreage 17.760	Print Date 9/23/2024	2023 Taxes: \$ 409.14		ESTIMATED		2024 Taxes: \$ 463.00
Legal Description PART OF THE SE1/4 SW1/4 SE COR N800' W1189.62' SW252.34' S121.54' SE309.57' S140.74 E412.82' SE312.18 E483.56'TO POB 150131.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	5,545	0	0	5,545		
	2024	0	6,275	0	0	6,275		

15-12-14-300-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-300-005-01 727 E 1500 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH ERIC E

Address to send notice if different than shown at left:

727 E 1500 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$80,827** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-300-005-01	Class 0011	Acreage 6.210	Print Date 9/23/2024	2023 Taxes: \$ 2,399.14	ESTIMATED			2024 Taxes: \$ 5,521.13
Legal Description BEG SE1/4 SW1/4 SW COR TH N457.76 SE309.57 S140.74 E412.82 SE312.18 W833.28 TO POB 150131.000 69-192369	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	723	319	54,173	8,300	63,515		
	2024	14,207	363	57,957	8,300	80,827		

15-12-14-300-005-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 25000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/06/2017	\$38,000	2017R00098	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-400-001-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRIPLE H INC

Address to send notice if different than shown at left:

1454 N 775 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,599** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-400-001-00	Class 0020	Acreage 105.090	Print Date 9/23/2024	2023 Taxes: \$ 560.70		ESTIMATED	2024 Taxes: \$ 560.69
Legal Description N1/2 SE1/4 & S1/2 SE1/4 LY E OF SO FK RIVER EX S800 150133.000 99-01860	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	7,599	0	0	0	7,599	
	2024	7,599	0	0	0	7,599	

Land Fair Cash Val: 22,797 Building Fair Cash Val: 0 **Non-Farm Value: 22,797**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
06/20/2012	\$200,000	2012R03353	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-400-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-400-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAVIS CHAD E & ALISHA D

Address to send notice if different than shown at left:

4236 IRWIN BRIDGE RD
CANTRALL IL 62625

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,083** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-400-001-01	Class 0020	Acreage 20.790	Print Date 9/23/2024	2023 Taxes: \$ 1,313.82		ESTIMATED		2024 Taxes: \$ 1,186.69
Legal Description PART W1/2 SE1/4 LY W OF SOUTH FORK & SANGAMON RIVER	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	17,806	0	0	0	17,806		
	2024	16,083	0	0	0	16,083		

Land Fair Cash Val: 48,249 Building Fair Cash Val: 0 **Non-Farm Value: 48,249**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/28/2012	\$475,000	2012R07081	No
10/31/2022	\$500,000	2022R03996	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-400-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-400-003-00 KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH FARMS

131 CEDAR ST
PO BOX 554
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,275** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-14-400-003-00	Class 0021	Acreage 21.730	Print Date 9/23/2024	2023 Taxes: \$ 481.02		ESTIMATED	2024 Taxes: \$ 536.79
Legal Description S800 THAT PART S1/2 SE1/4 LY S OF SOUTH FORK SANG RIVER EX BEG SW COR SE1/4 E385.6 93-01203 150132.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	6,519	0	0	6,519	
	2024	0	7,275	0	0	7,275	

15-12-14-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-400-003-01 761 E 1500 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FUNK EVAN M

Address to send notice if different than shown at left:

761 E 1500 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$93,324** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-400-003-01	Class 0010	Acreage 2.440	Print Date 9/23/2024	2023 Taxes: \$ 4,475.44	ESTIMATED			2024 Taxes: \$ 6,443.22
Legal Description BEG SW COR SE1/4 E385.6 TO POB N25 N319.23 N90.49 E252.60 S430.21 W235 TO POB 2002-01897 2002-00273	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	10,223	0	56,432	0	66,655		
	2024	10,073	0	83,251	0	93,324		

Land Fair Cash Val: 30,219 Building Fair Cash Val: 249,753 **Non-Farm Value: 279,972**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/2002	\$126,000		Yes
03/10/2017	\$162,500	2017R00888	Yes
02/13/2024	\$280,000	2024R00385	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-400-003-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-400-003-02 793 E 1500 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRIS MONTE & CAROLYN

Address to send notice if different than shown at left:

793 E 1500 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$73,767** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-400-003-02	Class 0010	Acreage 8.660	Print Date 9/23/2024	2023 Taxes: \$ 5,008.40	ESTIMATED			2024 Taxes: \$ 4,580.88
Legal Description PART OF SE1/4 SE1/4 2003-00058	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	16,888	0	62,673	0	79,561		
	2024	18,047	0	55,720	0	73,767		

Land Fair Cash Val: 54,141 Building Fair Cash Val: 167,160 **Non-Farm Value: 221,301**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 5683
2024	OWNER OCCUPD IMPROVEMENT	6000 5683

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/2003	\$25,980		Yes
05/12/2010	\$18,000	2010R02020	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-14-400-003-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-501-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ILLINOIS & MIDLAND RR INC

STE 300
200 MERIDIAN CENTRE BLVD
ROCHESTER NY 14618

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-14-501-001-00	Class 5100	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 12,965.62		ESTIMATED		2024 Taxes: \$ 28,508.17
Legal Description TRACK 4.64 MILES STATE ASSESS 155100CIM.003 96-00807	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0		
	2024	0	0	0	0	0		

15-12-14-501-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-14-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP ENVIRONMENTAL FUND INC

Address to send notice if different than shown at left:

216 SCHOOL DR
SHREWSBURY WV 25015

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-14-700-001-00	Class 7100	Acreage 639.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING ALL SEC EX 1.00AC 639.00AC MINED OUT 157713.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-12-14-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-100-001-00 TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SANDSTONE CREEK LLC
%BRUCE NATION

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,676** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-100-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,918.12		ESTIMATED	2024 Taxes: \$ 2,042.08
Legal Description NW1/4 NW1/4 BK 266 PG69 150148.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	25,996	0	0	25,996	
	2024	0	27,676	0	0	27,676	

15-12-15-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
07/20/2015	\$2,140,000	2015R02819	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-100-002-00 811 RAILROAD AVE KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEROZZO JOHN
% JOHN WAYNE PEROZZO

PO BOX 463
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$61,496** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-100-002-00	Class 0011	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 2,705.42		ESTIMATED		2024 Taxes: \$ 3,725.86
Legal Description NE1/4 NW1/4 150147.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,996	26,122	19,931	2,100	52,149		
	2024	3,940	27,713	27,343	2,500	61,496		

15-12-15-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	4483
2024	OWNER OCCUPD	6000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-100-003-00 TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MESSERSMITH BARBARA A TRUSTEE

Address to send notice if different than shown at left:

307 SUNRISE CIR
GROVE OK 74344

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,014** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-100-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 2,004.60		ESTIMATED	2024 Taxes: \$ 2,140.80
Legal Description SW1/4 NW1/4 150150.000 91-04972	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	27,168	0	0	27,168	
	2024	0	29,014	0	0	29,014	

15-12-15-100-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-100-004-00 TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEROZZO JOHN
% JOHN WAYNE PEROZZO

PO BOX 463
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,387** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-100-004-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 2,103.84		ESTIMATED 2024 Taxes: \$ 2,242.11	
Legal Description SE1/4 NW1/4 150152.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	28,513	0	0	28,513	
	2024	0	30,387	0	0	30,387	

15-12-15-100-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-200-001-00 TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MICHEL ROBERT L & SHARON A

Address to send notice if different than shown at left:

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$46,322** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-200-001-00	Class 0021	Acreage 67.890	Print Date 9/23/2024	2023 Taxes: \$ 3,190.70		ESTIMATED	2024 Taxes: \$ 3,417.88
Legal Description NW1/4 NE1/4 & NE1/4 NE1/4 LY S OF C&IM RY EX E496.51 150137.000 2000-00845 95-02300 96-01400 95-01284	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	43,243	0	0	43,243	
	2024	0	46,322	0	0	46,322	

15-12-15-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-201-001-00 646 E 1575 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HENLEY STEVEN & MAGGIE A

Address to send notice if different than shown at left:

646 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,150** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-201-001-00	Class 0010	Acreage 0.570	Print Date 9/23/2024	2023 Taxes: \$ 2,167.52		ESTIMATED		2024 Taxes: \$ 2,357.14
Legal Description .57AC TR IN NW COR NW1/4 SW1/4 NE1/4 2000-00845 150136.001 76-9269 250X100 12-15-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,070	0	45,510	0	49,580		
	2024	4,010	0	48,140	0	52,150		

Land Fair Cash Val: 12,030 Building Fair Cash Val: 144,420 **Non-Farm Value: 156,450**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	14204
2024	IMPROVEMENT	14204

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/27/2008	\$118,000	2008R04444	No
03/04/2019	\$130,000	2019R00650	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-201-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-201-002-00 TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HENLEY STEVEN & MAGGIE A

Address to send notice if different than shown at left:

646 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,486** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-201-002-00	Class 0021	Acreage 4.470	Print Date 9/23/2024	2023 Taxes: \$ 241.80		ESTIMATED 2024 Taxes: \$ 257.22	
Legal Description W1/2 N642 W638 SW1/4 NE1/4 & PART OF VACATED FIRST ST EX N250' W100' 1991R01318 100X412' & 219X662' 150136.000 12-15-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	3,277	0	0	3,277	
	2024	0	3,486	0	0	3,486	

15-12-15-201-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/27/2008	\$118,000	2008R04444	No
03/04/2019	\$130,000	2019R00650	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-201-003-00 654 E 1575 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOOKER DAVID A & AMY M

Address to send notice if different than shown at left:

654 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$46,793** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-201-003-00	Class 0011	Acreage 5.000	Print Date 9/23/2024	2023 Taxes: \$ 2,070.04	ESTIMATED			2024 Taxes: \$ 3,009.92
Legal Description E1/2 N642' W638' SW1/4 NE1/4 2004R00770 BK206 PG207 319X642' 150138.000 12-15-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,783	2,127	25,645	1,500	34,055		
	2024	10,347	1,999	32,947	1,500	46,793		

15-12-15-201-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/2004	\$65,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-201-004-00 658 E 1575 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DALE A & JULIE A TTEE

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$48,582** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-15-201-004-00	Class 0011	Acreage 5.000	Print Date 9/23/2024	2023 Taxes: \$ 2,338.34	ESTIMATED			2024 Taxes: \$ 2,773.00
Legal Description BEG 20E NW COR NE1/4 SW1/4 NE1/4 RN E309 S645.75 W309 N645.75 150139.000 83-48226 12-15-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,212	3,522	34,957	0	42,691		
	2024	4,150	3,729	40,703	0	48,582		

15-12-15-201-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-201-005-00 664 E 1575 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MULVANEY JOSHUA T & KRYSTAL

Address to send notice if different than shown at left:

664 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$94,834** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-201-005-00	Class 0010	Acreage 2.680	Print Date 9/23/2024	2023 Taxes: \$ 6,265.92		ESTIMATED		2024 Taxes: \$ 6,370.69
Legal Description BEG 10'W NE COR SW1/4 NE1/4 W303.35' S385.44' E303.35' N685.44' TO POB 2005R03058 2005R03057 303.35X385.44' 150153.000 12-15-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	10,734	0	80,800	0	91,534		
	2024	10,577	0	84,257	0	94,834		

Land Fair Cash Val: 31,731 Building Fair Cash Val: 252,771 **Non-Farm Value: 284,502**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	IMPROVEMENT	613
2024	IMPROVEMENT	613
	IMPROVEMENT	1880

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/27/2005	\$17,000	2005R03058	Yes
02/06/2006	\$12,000	2006R00587	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-201-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-201-007-00 125 WALDEN ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LARCHER DONALD R

Address to send notice if different than shown at left:

125 WALDEN ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,543** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-201-007-00	Class 0010	Acreage 1.000	Print Date 9/23/2024	2023 Taxes: \$ 1,405.22	ESTIMATED			2024 Taxes: \$ 1,405.21
Legal Description BEG 10'W & 348.9'S NE COR SW1/4 NE1/4 W303.35' S128.3' E303.35' N128.3' TO POB 1973R07407 150141.000 12-15-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,138	0	31,900	0	39,038		
	2024	7,033	0	33,510	0	40,543		

Land Fair Cash Val: 21,099 Building Fair Cash Val: 100,530 **Non-Farm Value: 121,629**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	9628
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	11133

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-201-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-201-008-00 500 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEROCCHI ANTONE

Address to send notice if different than shown at left:

500 S 1ST ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,426** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-201-008-00	Class 0010	Acreage 1.000	Print Date 9/23/2024	2023 Taxes: \$ 363.02	ESTIMATED			2024 Taxes: \$ 363.02
Legal Description BEG 10W & 20N SE COR NE1/4 SW1/4 NE1/4 N128.3 W303.35 S128.32 E303.35 150142.000 86-15705 12-15-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,138	0	12,453	0	19,591		
	2024	7,033	0	14,393	0	21,426		

Land Fair Cash Val: 21,099 Building Fair Cash Val: 43,179 **Non-Farm Value: 64,278**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	3671
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	5506

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-201-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-201-009-00 501 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAPPELLIN DAVID JOHN & MELISSA

Address to send notice if different than shown at left:

PO BOX 662
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$49,343** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-201-009-00	Class 0010	Acreage 1.000	Print Date 9/23/2024	2023 Taxes: \$ 2,129.16		ESTIMATED		2024 Taxes: \$ 2,829.15
Legal Description BG 10W 20S NE COR SE SW NE S 128.32 W303.35 N128.32 E303.35 150143.000 90-01965 93-02026 12-15-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,138	0	32,718	0	39,856		
	2024	7,033	0	42,310	0	49,343		

Land Fair Cash Val: 21,099 Building Fair Cash Val: 126,930 **Non-Farm Value: 148,029**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-201-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-201-010-00 425 WALDEN ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAUGHERTY J DAVID & CAROL

Address to send notice if different than shown at left:

425 S WALDEN ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,794** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-201-010-00	Class 0040	Acreage 3.570	Print Date 9/23/2024	2023 Taxes: \$ 206.02	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description E303.35 S513.24 SE1/4 SW1/4 NE1/4 MHRE 150144.000 89-7988 12-15-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	10,805	0	4,987	0	15,792		
	2024	12,457	0	5,337	0	17,794		

Land Fair Cash Val: 37,371 Building Fair Cash Val: 16,011 **Non-Farm Value: 53,382**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	Disabled Person	2000
	ELDERLY	5000
2024	OWNER OCCUPD	6000
	Disabled Person	1730
	ELDERLY	5000
	SEN FREEZE	5064

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-201-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-201-011-00 1530 N 655 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DALE A & JULIE A TRUSTEES

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$116,655** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-201-011-00	Class 0010	Acreage 3.070	Print Date 9/23/2024	2023 Taxes: \$ 5,467.48	ESTIMATED			2024 Taxes: \$ 8,607.41
Legal Description CODYS ADD LOT 2 83-47373 150151.000 431.23X310.39 12-15-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	11,571	0	62,529	0	74,100		
	2024	11,400	0	105,255	0	116,655		

Land Fair Cash Val: 34,200 Building Fair Cash Val: 315,765 **Non-Farm Value: 349,965**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/03/2021	\$350,000	2021R03808	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-201-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-201-011-01 505 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DALE A & JULIE A TRUSTEES

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,583** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-201-011-01	Class 0020	Acreage 1.500	Print Date 9/23/2024	2023 Taxes: \$ 237.00		ESTIMATED 2024 Taxes: \$ 116.80	
Legal Description CODYS ADD LOT 1 2000-06560 310.39X210.51 12-15-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,212	0	0	0	3,212	
	2024	1,583	0	0	0	1,583	

Land Fair Cash Val: 4,749 Building Fair Cash Val: 0 Non-Farm Value: 4,749

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/2000	\$58,200		Yes
11/01/2007	\$7,200	2007R05334	No
09/03/2021	\$350,000	2021R03808	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-201-011-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-201-012-00 1525 N 655 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LENZI SHANNON S & SHEILA R

Address to send notice if different than shown at left:

1525 N 655 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$41,223** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-201-012-00	Class 0010	Acreage 6.080	Print Date 9/23/2024	2023 Taxes: \$ 2,323.94		ESTIMATED	2024 Taxes: \$ 2,598.94
Legal Description PART OF THE SW1/4 NE1/4 414.84X639.75AV 150149.000 2000-00845 12-15-C 2004R04795(QCD) 67-182931 91-02570 98-06670	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	16,473	0	21,023	0	37,496	
	2024	16,233	0	24,990	0	41,223	

Land Fair Cash Val: 48,699 Building Fair Cash Val: 74,970 **Non-Farm Value: 123,669**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-201-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-201-013-00 1527 N 655 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NIEHAUS MATTHUE B & KENDRA L

Address to send notice if different than shown at left:

1527 N 655 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,369** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-201-013-00	Class 0011	Acreage 3.630	Print Date 9/23/2024	2023 Taxes: \$ 2,753.38	ESTIMATED			2024 Taxes: \$ 3,421.35
Legal Description SW1/4 SW1/4 NE1/4 & A PART OF VACATED FIRST ST EX 6.080AC SW COR 1998R08322 1974R11980 247.18X638.87'AV 150149.001 12-15-C	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	12,769	0	30,547	0	43,316		
	2024	8,310	329	43,730	0	52,369		

15-12-15-201-013-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1998	\$40,000		Yes
10/18/2021	\$172,500	2021R04424	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-202-006-00 1125 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NAGEL MATTHEW

Address to send notice if different than shown at left:

732 N 400 EAST RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,426** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-202-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,611.90	ESTIMATED			2024 Taxes: \$ 2,199.30
Legal Description KINCAID LOTS 26 THRU 30 BLK 33 99-05382 151880.000 82-42159 175X116 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,447	0	21,654	0	26,101		
	2024	4,383	0	23,043	0	27,426		

Land Fair Cash Val: 13,149 Building Fair Cash Val: 69,129 **Non-Farm Value: 82,278**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/21/2011	\$65,000	2011R05357	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-202-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-202-007-00 1131 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEZZE WANDA & PRIMO

1131 SPRINGFIELD ST
PO BOX 953
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,993** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-202-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED 2024 Taxes: \$ 0.00	
Legal Description KINCAID LOTS 31 & 32 & W1/2 LT 33 BLK 33 B242 151883.000 87-19269 87.5X116 12-10-H	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,223	0	17,631	0	19,854	
	2024	2,190	0	19,803	0	21,993	

Land Fair Cash Val: 6,570 Building Fair Cash Val: 59,409 **Non-Farm Value: 65,979**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	8854
2024	ELDERLY	5000
	OWNER OCCUPD	6000
	SEN FREEZE	10993

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-202-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-202-008-00 1135 SPRINGFIELD ST KINCAID

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MICHEL ROBERT L & SHARON A (LSR)
FOR EDWARD NORTHCRAFT (LSE)

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property,
appeals this assessment of said property at \$26,553 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: ASSESSMENT INCREASED DUE TO REMODELING. MAY QUALIFY FOR IMPROVEMENT EXEMPTION.

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 4,620 Building Fair Cash Val: 75,039 Non-Farm Value: 79,659

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Rows for 2023 and 2024 with categories like Leasehold Owner IMPROVEMENT.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Row: 06/04/2010, \$32,000, 2010R02335, Yes.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-202-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-202-009-00 175 MINE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILLER HAROLD W JR & TRACY L

175 MINE ST
PO BOX 552
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,740** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-202-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,241.10	ESTIMATED			2024 Taxes: \$ 1,502.76
Legal Description KINCAID LOT 35 BLK 33 2003R07642 98-04478 151886.000 93-05599 44X116 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,120	0	20,357	0	21,477		
	2024	1,103	0	23,637	0	24,740		

Land Fair Cash Val: 3,309 Building Fair Cash Val: 70,911 **Non-Farm Value: 74,220**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1998	\$45,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-202-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-202-010-00 1132 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NOBLES JANIE

Address to send notice if different than shown at left:

PO BOX 522
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,053** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-202-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 877.52		ESTIMATED	2024 Taxes: \$ 886.34
Legal Description KINCAID LOTS 36 & 37 BLK 33 151887.000 2004R05978 70X116 12-15-D 1998R00875 1980R33421	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,780	0	9,163	0	10,943	
	2024	1,753	0	9,300	0	11,053	

Land Fair Cash Val: 5,259 Building Fair Cash Val: 27,900 **Non-Farm Value: 33,159**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
09/01/2004	\$28,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-202-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-202-011-00 1128 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NOBLES RANDY W

Address to send notice if different than shown at left:

601 S GRAVEL PIT RD
 DECATUR IL 62522

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,736** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-202-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 215.80	ESTIMATED			2024 Taxes: \$ 299.59
Legal Description KINCAID LOTS 38 & 39 BLK 33 MHRE 151889.000 97-06668 70X116 12-15-D 2002-05207 93-01180 95-05798 97-05612	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,780	0	911	0	2,691		
	2024	1,753	0	1,983	0	3,736		

Land Fair Cash Val: 5,259 Building Fair Cash Val: 5,949 **Non-Farm Value: 11,208**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1995	\$17,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-202-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-202-012-00 1124 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CROWDER ROBERT E

Address to send notice if different than shown at left:

PO BOX 781
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,663** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-202-012-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 570.72		ESTIMATED		2024 Taxes: \$ 855.07
Legal Description KINCAID LOTS 40 41 42 BLK 33 151894.000 82-39791 105X116 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,666	0	10,451	0	13,117		
	2024	2,630	0	14,033	0	16,663		

Land Fair Cash Val: 7,890 Building Fair Cash Val: 42,099 **Non-Farm Value: 49,989**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1981	\$31,120		Yes
03/09/2007	\$18,500	2007R01104	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-202-012-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-202-014-00 1118 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EMERSON COLE

PO BOX 653
1300 SPRINGFIELD ST
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,667** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-202-014-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 306.02	ESTIMATED			2024 Taxes: \$ 133.68
Legal Description KINCAID LTS 43 44 45 46 BLK 33 MHRE 151896.000 2001-05169 140X116 12-15-D 2001-04160 93-00544	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,557	0	259	0	3,816		
	2024	1,414	0	253	0	1,667		

Land Fair Cash Val: 4,242 Building Fair Cash Val: 759 **Non-Farm Value: 5,001**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/04/2024	\$5,000	2024R00933	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-202-014-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-202-015-00 1110 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CAMPBELL JOHN D

Address to send notice if different than shown at left:

PO BOX 1111
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,220** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-202-015-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 125.74		ESTIMATED		2024 Taxes: \$ 178.02
Legal Description KINCAID LOT 47 BLK 33 151899.000 35X116 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	890	0	678	0	1,568		
	2024	877	0	1,343	0	2,220		

Land Fair Cash Val: 2,631 Building Fair Cash Val: 4,029 **Non-Farm Value: 6,660**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-202-015-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-202-016-00 1106 TAYLORVILLE ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOBBS FRANCIS ALAN

Address to send notice if different than shown at left:

PO BOX 235
EDINBURG

IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,346** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-202-016-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 140.42	ESTIMATED			2024 Taxes: \$ 428.70
Legal Description KINCAID LOTS 48 & 49 BLK 33 MHRE 151900.000 2004R04271 70X116 12-15-D 1994R03417	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,780	0	4,897	0	6,677		
	2024	1,753	0	9,593	0	11,346		

Land Fair Cash Val: 5,259 Building Fair Cash Val: 28,779 **Non-Farm Value: 34,038**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	4926
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2004	\$28,000		Yes
02/19/2021	\$40,000	2021R00646	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-202-016-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-203-002-00 WASHINGTON ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF JEISYVILLE
%PAULETTE TIREY CLERK

PO BOX 859
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-203-002-00	Class 9900	Acreage 7.350	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description W776 N12.50AC SE1/4 NE1/4 BALL FIELD BK315 PG352 ST DOC# 85-11-97 150135.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-15-203-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-203-003-00 WASHINGTON AVE TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

LOY DEVELOPMENT INC

5241 BUFORD ST
SPRINGFIELD IL 62703

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$76,477 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 134,370 Building Fair Cash Val: 95,061 Non-Farm Value: 229,431

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? (Sales History)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-203-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-203-004-00 325 N EAST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GOLDSMITH LARRY

Address to send notice if different than shown at left:

325 N EAST ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,939** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-203-004-00	Class 0011	Acreage 5.000	Print Date 9/23/2024	2023 Taxes: \$ 222.68	ESTIMATED			2024 Taxes: \$ 659.57
Legal Description 5.00AC TR LY S C&IM RIGHTAWAY NE1/4 NE1/4 MHPT 150135.003 98-03956 12-15-D 95-02211	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,653	1,187	7,178	0	14,018		
	2024	9,060	1,329	9,550	0	19,939		

15-12-15-203-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/1998	\$11,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-204-001-00 405 WASHINGTON AVE TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

VERBISKI JONATHAN

Address to send notice if different than shown at left:

405 WASHINGTON AVE
TAYLORVILLE IL 62568

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$26,026 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 15,759 Building Fair Cash Val: 62,319 Non-Farm Value: 78,078

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Exemption History, Amount, Tax Year. Shows 2023 and 2024 exemptions for OWNER OCCUPD at 6000.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows a sale on 02/11/2016 for \$45,000 with Doc# 2016R00521 and Qualified? Yes.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes handwritten initials Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-204-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-204-002-00 401 WASHINGTON AVE TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WOODARD GEORGE

Address to send notice if different than shown at left:

PO BOX 91
SAINT JOSEPH IL 61873

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,665** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-204-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 911.22	ESTIMATED			2024 Taxes: \$ 1,424.68
Legal Description JEISYVILLE LT 1 BLK 4 2004R03219 151596.000 50X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	16,363	0	17,938		
	2024	1,550	0	17,115	0	18,665		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 51,345 **Non-Farm Value: 55,995**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
Tax Year 2023 Leasehold Owner	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2009	\$39,300	2009R01881	No
10/11/2022	\$56,000	2022R03706	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-204-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-204-003-00 402 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SUMMERS JAMES MICHAEL & SHARON

402 S FIRST ST
PO BOX 856
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,420** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-204-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 718.26		ESTIMATED	2024 Taxes: \$ 718.25
Legal Description JEISYVILLE LTS 8 9 10 BLK 4 151604.000 73-9947 150X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,722	0	20,821	0	25,543	
	2024	4,653	0	23,767	0	28,420	

Land Fair Cash Val: 13,959 Building Fair Cash Val: 71,301 **Non-Farm Value: 85,260**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	5133
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	8010

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-204-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-204-004-00 406 S FIRST ST JEISEYVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HENLEY DOUGLAS & ARLANA

Address to send notice if different than shown at left:

406 S 1ST ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,790** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-204-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,673.04	ESTIMATED			2024 Taxes: \$ 2,502.82
Legal Description JEISYVILLE LTS 6 & 7 BLK 4 151602.000 94-06991 100X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,147	0	37,873	0	41,020		
	2024	3,103	0	35,687	0	38,790		

Land Fair Cash Val: 9,309 Building Fair Cash Val: 107,061 **Non-Farm Value: 116,370**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/12/2020	\$100,000	2020R03024	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-204-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-205-001-00 311 WASHINGTON AVE TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KOEHNE KYLE

PO BOX 471
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,777** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-205-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 41.22		ESTIMATED	2024 Taxes: \$ 41.22	
Legal Description JEISYVILLE LT 6 BLK 3 99-06492 151589.000 75-1816 50X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	5,221	0	6,796		
	2024	1,550	0	5,227	0	6,777		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 15,681 **Non-Farm Value: 20,331**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 IMPROVEMENT	2694
<u>Tax Year</u> 2024 IMPROVEMENT	2694

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/03/2016	\$36,500	2016R02810	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-205-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-205-002-00 309 WASHINGTON AVE TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DURBIN PAUL C & ANNA MARIE

Address to send notice if different than shown at left:

309 WASHINGTON AVE
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,263** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-205-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 725.12		ESTIMATED 2024 Taxes: \$ 1,393.99	
Legal Description JEISYVILLE LOTS 4 & 5 BLK 3 1994R05710 151588.000 1985R10984 100X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,147	0	22,384	0	25,531	
	2024	3,103	0	26,160	0	29,263	

Land Fair Cash Val: 9,309 Building Fair Cash Val: 78,480 **Non-Farm Value: 87,789**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	5031
2024	OWNER OCCUPD	6000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-205-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-205-004-00 305 WASHINGTON AVE TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DRNJEVIC MICHAEL L & CHERYL

Address to send notice if different than shown at left:

302 S 1ST ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,550** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-205-004-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 120.22	ESTIMATED			2024 Taxes: \$ 118.31
Legal Description JEISYVILLE LT 3 BLK 3 151586.000 94-04623 50X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	0	0	1,575		
	2024	1,550	0	0	0	1,550		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 0 **Non-Farm Value: 4,650**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-205-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-205-005-00 303 WASHINGTON AVE TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DRNJEVIC MICHAEL L

Address to send notice if different than shown at left:

302 S 1ST ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,647** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-205-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,021.58		ESTIMATED		2024 Taxes: \$ 1,270.65
Legal Description JEISYVILLE LT 2 BLK 3 151585.000 90-03943 50X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	11,809	0	13,384		
	2024	1,550	0	15,097	0	16,647		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 45,291 **Non-Farm Value: 49,941**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1990	\$13,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-205-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-205-006-00 301 WASHINGTON AVE TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KOHLER CICILY L

Address to send notice if different than shown at left:

301 WASHINGTON AVE
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,357** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-205-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,002.58		ESTIMATED		2024 Taxes: \$ 1,095.85
Legal Description JEISYVILLE LT 1 BLK 3 2003R01763 2002-07601 151584.000 92-00816 50X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	17,560	0	19,135		
	2024	1,550	0	18,807	0	20,357		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 56,421 **Non-Farm Value: 61,071**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/2002	\$54,900		Yes
12/14/2007	\$35,000	2007R06056	No
03/09/2015	\$53,000	2015R00831	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-205-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-205-008-00 302 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DRNJEVIC MICHAEL L & CHERYL

Address to send notice if different than shown at left:

302 S 1ST ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$39,163** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-205-008-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,373.92		ESTIMATED		2024 Taxes: \$ 1,615.65
Legal Description JEISYVILLE LTS 10 11 & 12 BLK 3 90-02334 151594.000 87-24314 150X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,722	0	31,274	0	35,996		
	2024	4,653	0	34,510	0	39,163		

Land Fair Cash Val: 13,959 Building Fair Cash Val: 103,530 **Non-Farm Value: 117,489**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	IMPROVEMENT	6996
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	IMPROVEMENT	6996

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-205-008-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-205-010-00 150 CATHERINE ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLARK CHAD E

Address to send notice if different than shown at left:

150 CATHERINE ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$42,460** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-205-010-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 2,078.82		ESTIMATED	2024 Taxes: \$ 2,782.95	
Legal Description JEISYVILLE LOTS 7 8 & 9 BLK 3 1972R01068 151590.000 1988R05132 150X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,722	0	28,513	0	33,235		
	2024	4,653	0	37,807	0	42,460		

Land Fair Cash Val: 13,959 Building Fair Cash Val: 113,421 **Non-Farm Value: 127,380**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/24/2012	\$21,000	2012R02222	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-205-010-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-206-001-00 207 WASHINGTON AVE TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH MATTHEW D

Address to send notice if different than shown at left:

207 WASHINGTON AVE
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,743** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-206-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,463.16		ESTIMATED		2024 Taxes: \$ 1,659.62
Legal Description JEISYVILLE LTS 4 5 & 6 BLK 2 151577.000 89-10824 150X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,722	0	20,447	0	25,169		
	2024	4,653	0	23,090	0	27,743		

Land Fair Cash Val: 13,959 Building Fair Cash Val: 69,270 **Non-Farm Value: 83,229**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/30/2015	\$52,000	2015R04057	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-206-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-206-002-00 125 GOLDIE ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JONES JACK L & SHEILA L

Address to send notice if different than shown at left:

125 GOLDIE ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,083** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-206-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description JEISYVILLE LTS 1 2 & 3 BLK 2 MHRE 151576.000 90-04971 150X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,722	0	6,882	0	11,604		
	2024	4,653	0	14,430	0	19,083		

Land Fair Cash Val: 13,959 Building Fair Cash Val: 43,290 **Non-Farm Value: 57,249**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	604
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	8083

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-206-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-206-003-00 204 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ALLEN MELISA

Address to send notice if different than shown at left:

204 S 1ST ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,830** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-15-206-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,156.54	ESTIMATED			2024 Taxes: \$ 1,971.57
Legal Description JEISYVILLE LTS 10 11 12 BLK 2 2001-05556 151582.000 98-03899 150X142 12-15-D 94-04506 96-00698	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,722	0	18,430	0	23,152		
	2024	4,653	0	29,177	0	33,830		

Land Fair Cash Val: 13,959 Building Fair Cash Val: 87,531 **Non-Farm Value: 101,490**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled Person	6000 2000
2024	OWNER OCCUPD Disabled Person	6000 2000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/2001	\$67,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-206-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-206-004-00 206 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF JEISYVILLE
%PAULETTE TIREY CLERK

PO BOX 859
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-206-004-00	Class 9900	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description JEISYVILLE LTS 7 8 9 BLK 2 CITY HALL & PLAYGROUND 150X142 ST DOC# 85-11-98 151581.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0		
	2024	0	0	0	0	0		

15-12-15-206-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-207-001-00 111 WASHINGTON AVE TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLARK SHIRLEY (LSE)
% CHAD E CLARK (LSR)

150 CATHERINE ST
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,790** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-207-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 430.28	ESTIMATED			2024 Taxes: \$ 430.27
Legal Description JEISYVILLE LTS 4 5 & 6 BLK 1 98-07030 151565.000 96-03559 150X142 12-15-D 95-04400 88-2464	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,722	0	17,401	0	22,123		
	2024	4,653	0	17,137	0	21,790		

Land Fair Cash Val: 13,959 Building Fair Cash Val: 51,411 **Non-Farm Value: 65,370**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	SEN FREEZE	5486
	Leasehold Owner	6000
2024	ELDERLY	5000
	SEN FREEZE	5153
	Leasehold Owner	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1998	\$44,900		Yes
06/09/2009	\$60,000	2009R03377	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-207-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-207-002-00 125 EAST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SMITH NICHOLIS B

Address to send notice if different than shown at left:

125 N EAST ST
TAYLORVILLE

IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$35,323 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 13,959 Building Fair Cash Val: 92,010 Non-Farm Value: 105,969

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Row for IMPROVEMENT with amount 8613 and tax year 2023.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Row for 04/30/2019, \$80,000, 2019R01299, No.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes handwritten initials Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-207-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-207-003-00 102 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HUSTON ROBERT JR & CRYSTAL

Address to send notice if different than shown at left:

102 S 1ST ST
TAYLORVILLE

IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$33,063 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 13,959 Building Fair Cash Val: 85,230 Non-Farm Value: 99,189

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Shows 6000 for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows sale on 11/29/2021 for \$53,333.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-207-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-207-004-00 108 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DANCE KIM E

Address to send notice if different than shown at left:

108 S 1ST ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,083** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-207-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,224.70		ESTIMATED		2024 Taxes: \$ 1,380.25
Legal Description JEISYVILLE LTS 7 8 & 9 BLK 1 151569.000 2002-04642 150X142 12-15-D 94-06912 94-06913	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,722	0	17,323	0	22,045		
	2024	4,653	0	19,430	0	24,083		

Land Fair Cash Val: 13,959 Building Fair Cash Val: 58,290 **Non-Farm Value: 72,249**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/01/2002	\$54,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-207-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-208-001-00 409 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCQUIRE GERALD R

Address to send notice if different than shown at left:

409 S 1ST ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,220** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-208-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 968.62		ESTIMATED 2024 Taxes: \$ 627.42	
Legal Description THIRD EXT JEISYVILLE LTS 4 & 5 BLK 5 97-04488 151651.000 76-10057 100X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,147	0	15,543	0	18,690	
	2024	3,103	0	11,117	0	14,220	

Land Fair Cash Val: 9,309 Building Fair Cash Val: 33,351 **Non-Farm Value: 42,660**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-208-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-208-002-00 403 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PASQUENO DONNA & MARTIN J

Address to send notice if different than shown at left:

1875 E 1200 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,477** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-15-208-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 724.68		ESTIMATED 2024 Taxes: \$ 112.74	
Legal Description THIRD EXT JEISYVILLE LTS 2 & 3 BLK 5 151658.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
94-05246 12-15-D	2023	3,147	0	6,347	0	9,494	
	2024	790	0	687	0	1,477	

Land Fair Cash Val: 2,370 Building Fair Cash Val: 2,061 **Non-Farm Value: 4,431**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-208-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-208-003-00 401 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PASQUENO DONNA & MARTIN J

Address to send notice if different than shown at left:

1875 E 1200 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,514** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-208-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 164.42	ESTIMATED			2024 Taxes: \$ 115.56
Legal Description THIRD EXT JEISYVILLE LT 1 BLK 5 151647.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
94-05246 50X142 12-15-D	2023	866	0	1,288	0	2,154		
	2024	397	0	1,117	0	1,514		

Land Fair Cash Val: 1,191 Building Fair Cash Val: 3,351 **Non-Farm Value: 4,542**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-208-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-208-004-00 400 S SECOND ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

WARREN JASON S

Address to send notice if different than shown at left:

400 S 2ND ST
TAYLORVILLE

IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$2,273 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 3,939 Building Fair Cash Val: 2,880 Non-Farm Value: 6,819

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? (Sales History)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-208-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-208-005-00 404 S SECOND ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DRNJEVIC BRIAN & BRIANNA

225 KINCAID ST

TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,027** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-208-005-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 156.86		ESTIMATED		2024 Taxes: \$ 154.72
Legal Description THIRD EXT JEISYVILLE LTS 8 & 9 BLK 5 151654.000 100X142	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,055	0	0	0	2,055		
	2024	2,027	0	0	0	2,027		

Land Fair Cash Val: 6,081 Building Fair Cash Val: 0 **Non-Farm Value: 6,081**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/24/2018	\$1,000	2018R02332	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-208-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-208-006-00 406 S SECOND ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DRNJEVIC BRIAN & BRIANNA

225 KINCAID ST

TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$853** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-208-006-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 66.10		ESTIMATED		2024 Taxes: \$ 65.11
Legal Description THIRD EXT JEISYVILLE LOT 7 BLK 5 151653.000 50X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	866	0	0	0	866		
	2024	853	0	0	0	853		

Land Fair Cash Val: 2,559 Building Fair Cash Val: 0 **Non-Farm Value: 2,559**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
07/24/2018	\$1,000	2018R02332	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-208-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-208-007-00 408 S SECOND ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DRNJEVIC MICHAEL L & CHERYL

Address to send notice if different than shown at left:

302 S 1ST ST
TAYLORVILLE

IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$14,660 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 3,039 Building Fair Cash Val: 40,941 Non-Farm Value: 43,980

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-208-007-00 (Vertical text on the left margin)

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-209-002-00 309 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KATCHER JOHN D

Address to send notice if different than shown at left:

302 S 2ND ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,886** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-209-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 950.00	ESTIMATED			2024 Taxes: \$ 601.93
Legal Description THIRD EXT JEISYVILLE LOTS 5 & 6 BLK 6 151661.000 B215 P258 100X142 12-15-D 1986R13916	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,147	0	9,299	0	12,446		
	2024	3,103	0	4,783	0	7,886		

Land Fair Cash Val: 9,309 Building Fair Cash Val: 14,349 **Non-Farm Value: 23,658**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-209-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-209-003-00 305 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BANDY PAUL D & SANDRA K

305 S FIRST ST
PO BOX 104
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,180** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-209-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 866.64		ESTIMATED 2024 Taxes: \$ 1,616.64	
Legal Description THIRD EXT JEISYVILLE LTS 3 & 4 BLK 6 151659.000 72-3953 100X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,147	0	26,523	0	29,670	
	2024	3,103	0	29,077	0	32,180	

Land Fair Cash Val: 9,309 Building Fair Cash Val: 87,231 **Non-Farm Value: 96,540**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	7316
2024	OWNER OCCUPD	6000
	ELDERLY	5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-209-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-209-004-00 303 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DRNJEVIC BRIAN & BRIANNE

225 KINCAID ST

TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,013** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-209-004-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 101.76		ESTIMATED 2024 Taxes: \$ 77.32	
Legal Description THIRD EXT JEISYVILLE LT 2 BLK 6 151658.000 2002-02216 50X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,333	0	0	0	1,333	
	2024	1,013	0	0	0	1,013	

Land Fair Cash Val: 3,039 Building Fair Cash Val: 0 Non-Farm Value: 3,039

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
 Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
07/14/2020	\$2,500	2020R02546	No
04/11/2022	\$3,000	2022R01314	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-209-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-209-005-00 225 KINCAID ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DRNJEVIC BRIAN B & ROBIN R

225 KINCAID ST

TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,270** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-209-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 450.26		ESTIMATED		2024 Taxes: \$ 631.24
Legal Description THIRD EXT JEISYVILLE LT 1 BLK 6 99-01698 151657.000 95-01604 50X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	10,324	0	11,899		
	2024	1,550	0	12,720	0	14,270		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 38,160 **Non-Farm Value: 42,810**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-209-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-209-006-00 275 KINCAID ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BOSIE REBECCA LOU ETAL

Address to send notice if different than shown at left:

275 KINCAID ST
TAYLORVILLE IL 62568

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$13,143 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 4,650 Building Fair Cash Val: 34,779 Non-Farm Value: 39,429

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History

Amount

Tax Year 2023

OWNER OCCUPD 6000
ELDERLY 5000
SEN FREEZE 1197
IMPROVEMENT 3431

Tax Year 2024

OWNER OCCUPD 6000
ELDERLY 5000
SEN FREEZE 2143

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History

Table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-209-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-209-007-00 302 S SECOND ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

KATCHER JOHN D

Address to send notice if different than shown at left:

302 S 2ND ST
TAYLORVILLE

IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$14,427 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 4,650 Building Fair Cash Val: 38,631 Non-Farm Value: 43,281

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Tax Year, Exemption History, Amount. Lists exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-209-007-00 (vertical text)

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-209-009-00 306 S SECOND ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ANDRIGHETTI ALYCE & GENE

Address to send notice if different than shown at left:

306 S 2ND ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,086** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-209-009-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 660.78		ESTIMATED	2024 Taxes: \$ 660.78	
Legal Description THIRD EXT JEISYVILLE LOTS 8 9 & 10 BLK 6 MHRE 151665.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
86-13888 150X142 12-15-D 1987R22706	2023	4,722	0	20,923	0	25,645		
	2024	4,653	0	22,433	0	27,086		

Land Fair Cash Val: 13,959 Building Fair Cash Val: 67,299 **Non-Farm Value: 81,258**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	5988
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	7429

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-209-009-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-209-011-00 250 CATHERINE ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SANGES JANICE F

Address to send notice if different than shown at left:

250 CATHERINE ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,230** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-209-011-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description THIRD EXT JEISYVILLE LT 7 BLK 6 MHRE 151663.000 2001-04120 50X142 12-15-D 2004R07355	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	2,854	0	4,429		
	2024	1,550	0	6,680	0	8,230		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 20,040 **Non-Farm Value: 24,690**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	3929
	ELDERLY	500
	SEN FREEZE	0
2024	OWNER OCCUPD	6000
	ELDERLY	1663
	SEN FREEZE	0
	IMPROVEMENT	567

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2001	\$10,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-209-011-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-210-001-00 200 KINCAID ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TIREY PAULETTE & RICHARD L

200 KINCAID ST
PO BOX 527
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,723** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-210-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED 2024 Taxes: \$ 0.00		
Legal Description SECOND EXT JEISYVILLE LTS 5 & 6 BLK 7 151632.000 77-14525 100X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,147	0	36,055	0	39,202	
	2024	3,103	0	49,620	0	52,723	

Land Fair Cash Val: 9,309 Building Fair Cash Val: 148,860 **Non-Farm Value: 158,169**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled 70-100% Ve	6000 33202
2024	OWNER OCCUPD Disabled 70-100% Ve	6000 46723

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-210-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-210-002-00 205 S FIRST ST KINCAID

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WOLFE JIM

PO BOX 583
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,377** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-210-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description SECOND EXT JEISYVILLE LOTS 3 & S1/2 LT 4 BLK 7 1997R04636 1995R03990 50X142'& 50X70.71 151630.000 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,058	0	7,516	0	9,574		
	2024	2,030	0	7,347	0	9,377		

Land Fair Cash Val: 6,090 Building Fair Cash Val: 22,041 **Non-Farm Value: 28,131**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History


Amount

Tax Year 2023

OWNER OCCUPD 4643
ELDERLY 500
IMPROVEMENT 4431
SEN FREEZE 0

Tax Year 2024

OWNER OCCUPD 4446
ELDERLY 500
IMPROVEMENT 4431
SEN FREEZE 0

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History

Date Sold	Sale Price	Doc#	Qualified?
08/01/1995	\$16,000	1995R03990	Yes
03/22/2006	\$15,000	2006R01313	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-210-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-210-002-01 207 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ROGERS FAUN

Address to send notice if different than shown at left:

207 S 1ST ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,414** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-210-002-01	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED		2024 Taxes: \$ 31.60
Legal Description SECOND EXT JEISYVILLE N1/2 LT 4 BLK 7 1997R04636 1995R03990 50X70.71 151630.000 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,092	0	4,406	0	5,498		
	2024	1,077	0	5,337	0	6,414		

Land Fair Cash Val: 3,231 Building Fair Cash Val: 16,011 **Non-Farm Value: 19,242**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-210-002-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-210-003-00 203 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CLARK THOMAS O & MARY SUE

Address to send notice if different than shown at left:

203 S 1ST ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,583** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-210-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,879.30		ESTIMATED		2024 Taxes: \$ 2,105.38
Legal Description SECOND EXT JEISYVILLE LTS 1&2 BLK 7 151628.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
83-72 100X142 12-15-D	2023	3,147	0	32,474	0	35,621		
	2024	3,103	0	35,480	0	38,583		

Land Fair Cash Val: 9,309 Building Fair Cash Val: 106,440 **Non-Farm Value: 115,749**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-210-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-210-004-00 200 S SECOND ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BANDY LARRY L

PO BOX 104
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,327** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-210-004-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 180.30		ESTIMATED		2024 Taxes: \$ 177.62
Legal Description SECOND EXT JEISYVILLE E1/2 LT 11 & ALL LT 12 BLK 7 98-04197 151638.000 98-04563 75X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,362	0	0	0	2,362		
	2024	2,327	0	0	0	2,327		

Land Fair Cash Val: 6,981 Building Fair Cash Val: 0 **Non-Farm Value: 6,981**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-210-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-210-005-00 204 S SECOND ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOWE PAULA K

Address to send notice if different than shown at left:

PO BOX 773
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,370** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-210-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 292.20		ESTIMATED 2024 Taxes: \$ 822.14	
Legal Description SECOND EXT JEISYVILLE LT 10 & W1/2 LT 11 BLK 7 2000-07555 151636.000 98-05411 75X142 12-15-D 80-30793	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,362	0	8,065	0	10,427	
	2024	2,327	0	15,043	0	17,370	

Land Fair Cash Val: 6,981 Building Fair Cash Val: 45,129 **Non-Farm Value: 52,110**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 599
2024	OWNER OCCUPD IMPROVEMENT	6000 599

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-210-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-210-006-00 206 S SECOND ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GIBERSON BRENT M

Address to send notice if different than shown at left:

206 S 2ND ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,113** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-15-210-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 479.34	ESTIMATED			2024 Taxes: \$ 1,611.53
Legal Description SECOND EXT JEISYVILLE LTS 8 & 9 BLK 7 2000-02977 151635.000 98-03591 100X142 12-15-D 80-30793	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,147	0	13,327	0	16,474		
	2024	3,103	0	24,010	0	27,113		

Land Fair Cash Val: 9,309 Building Fair Cash Val: 72,030 **Non-Farm Value: 81,339**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
Tax Year 2023 IMPROVEMENT	4194

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/2000	\$42,500		Yes
05/01/2007	\$52,700	2007R02137	Yes
09/04/2012	\$34,000	2012R04915	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-210-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-210-007-00 210 S SECOND ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WILLIAMS MELISSA R & JAMES C

Address to send notice if different than shown at left:

321 E FRANKLIN ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,263** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-210-007-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 80.92	ESTIMATED			2024 Taxes: \$ 401.72
Legal Description SECOND EXT JEISYVILLE LT 7 BLK 7 151633.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
2001-09054 50X142 12-15-D B181 P286	2023	1,030	0	6,030	0	7,060		
	2024	1,013	0	4,250	0	5,263		

Land Fair Cash Val: 3,039 Building Fair Cash Val: 12,750 **Non-Farm Value: 15,789**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/2001	\$18,000		Yes
06/23/2009	\$16,500	2009R03667	Yes
11/22/2011	\$15,500	2011R05366	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-210-007-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-211-001-00 111 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOTT AUDREY LINETTE & HAROLD

111 S FIRST ST
PO BOX 764
KINCAID IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,423** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-211-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 828.24	ESTIMATED			2024 Taxes: \$ 566.59
Legal Description JEISYVILLE EXTENDED LOTS 5 & 6 BLK 8 1992R02508 100X142' 151611.000 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,147	0	13,704	0	16,851		
	2024	3,103	0	10,320	0	13,423		

Land Fair Cash Val: 9,309 Building Fair Cash Val: 30,960 **Non-Farm Value: 40,269**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-211-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-211-003-00 107 S FIRST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EVRLY ALEX &
DESTINY BARBEAU

107 S 1ST ST
TAYLORVILLE

IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,331** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-211-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 533.40		ESTIMATED 2024 Taxes: \$ 2,009.81	
Legal Description JEISYVILLE EXTENDED LTS 3 & 4 BLK 8 97-05349 151609.000 93-03971 100X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,147	0	9,841	0	12,988	
	2024	3,103	0	23,228	0	26,331	

Land Fair Cash Val: 9,309 Building Fair Cash Val: 69,684 **Non-Farm Value: 78,993**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/19/2012	\$30,000	2012R06377	No
11/15/2023	\$12,000	2023R03376	No
06/27/2024	\$79,000	2024R01863	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-211-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-211-004-00 225 EAST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BOULANGER TEENA & PAUL

Address to send notice if different than shown at left:

225 S EAST ST
TAYLORVILLE

IL 62568

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$49,310 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 7,881 Building Fair Cash Val: 140,049 Non-Farm Value: 147,930

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Tax Year, Exemption History, Amount. Shows exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Date Sold, Sale Price, Doc#, Qualified?. Shows a sale on 10/01/1996 for \$68,000.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-211-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-211-005-00 102 S SECOND ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

THOMAS EDWARD W & CAROLYN A

Address to send notice if different than shown at left:

102 S 2ND ST
TAYLORVILLE

IL 62568

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$64,020 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 18,609 Building Fair Cash Val: 173,451 Non-Farm Value: 192,060

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year. Lists exemptions for 2023 and 2024.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-211-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-211-006-00 110 S SECOND ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RULE KENT E & CATHY

Address to send notice if different than shown at left:

PO BOX 725
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,214** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-211-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 619.88	ESTIMATED			2024 Taxes: \$ 1,237.60
Legal Description JEISYVILLE EXTENDED LTS 7 & 8 BLK 8 151612.000 91-02443 100X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,666	0	5,455	0	8,121		
	2024	2,627	0	13,587	0	16,214		

Land Fair Cash Val: 7,881 Building Fair Cash Val: 40,761 **Non-Farm Value: 48,642**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/01/1991	\$10,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-211-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-212-001-00 302 WALDEN ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GERMAN SHANON

Address to send notice if different than shown at left:

173 E LOCKHART ST
NIANTIC IL 62551

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,603** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-212-001-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 135.26		ESTIMATED 2024 Taxes: \$ 122.36	
Legal Description THIRD EXT JEISYVILLE LTS 7 & 8 BLK 12 151681.000 112.5X117 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,772	0	0	0	1,772	
	2024	1,603	0	0	0	1,603	

Land Fair Cash Val: 4,809 Building Fair Cash Val: 0 **Non-Farm Value: 4,809**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/21/2010	\$300	2010R04878	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-212-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-212-002-00 306 WALDEN ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GERMAN SHANON J

Address to send notice if different than shown at left:

155 E LOCKHART ST
NIANTIC IL 62551

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,370** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-212-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 253.56		ESTIMATED 2024 Taxes: \$ 333.56	
Legal Description THIRD EXT JEISYVILLE LTS 5 & 6 BLK 12 151680.000 89-6842 112.5X117 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,215	0	107	0	3,322	
	2024	3,170	0	1,200	0	4,370	

Land Fair Cash Val: 9,510 Building Fair Cash Val: 3,600 **Non-Farm Value: 13,110**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/1989	\$15,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-212-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-212-003-00 307 CATHERINE ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GIBERSON MICHAEL & TAMMY

Address to send notice if different than shown at left:

307 CATHERINE ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,404** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-212-003-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 561.48	ESTIMATED			2024 Taxes: \$ 1,710.07
Legal Description THIRD EXT JEISYVILLE LTS 2 3 & 4 BLK 12 94-6988 151677.000 92-1561 168.75X117 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,143	0	10,213	0	13,356		
	2024	3,097	0	25,307	0	28,404		

Land Fair Cash Val: 9,291 Building Fair Cash Val: 75,921 **Non-Farm Value: 85,212**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/1992	\$10,000		Yes
11/21/2006	\$22,000	2006R05896	No
11/12/2009	\$26,200	2009R06289	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-212-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-212-004-00 401 S SECOND ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEAN ROBERT THOMAS & YOLANDA

Address to send notice if different than shown at left:

401 S 2ND ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,544** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-212-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description THIRD EXT JEISYVILLE BLK 12 151676.000 56X117 12-15-D	LT 1	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	1,599	0	8,151	0	9,750	
		2024	1,577	0	16,967	0	18,544	

Land Fair Cash Val: 4,731 Building Fair Cash Val: 50,901 **Non-Farm Value: 55,632**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	3750
	SEN FREEZE	0
2024	OWNER OCCUPD	6000
	ELDERLY	4048
	SEN FREEZE	0
	IMPROVEMENT	8496

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-212-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-213-001-00 300 CATHERINE ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GIBERSON MICHAEL &
BRENT GIBERSON

307 CATHERINE ST
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,617** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-213-001-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 280.20	ESTIMATED			2024 Taxes: \$ 276.08
Legal Description THIRD EXT JEISYVILLE LTS 7 8 9 10 BLK 11 75-5041 151674.000 178.52X142 12-15-D 2002-03964WD 2002-03971QC	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,671	0	0	0	3,671		
	2024	3,617	0	0	0	3,617		

Land Fair Cash Val: 10,851 Building Fair Cash Val: 0 Non-Farm Value: 10,851

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/07/2009	\$3,200	2009R04654	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-213-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-213-002-00 308 CATHERINE ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GIBERSON MICHAEL & TAMMY

Address to send notice if different than shown at left:

307 CATHERINE ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$903** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-213-002-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 70.16		ESTIMATED		2024 Taxes: \$ 68.92
Legal Description THIRD EXT JEISYVILLE LT 6 BLK 11 151673.001		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
94-06988 44.63X142 12-15-D		2023	919	0	0	0	919	
		2024	903	0	0	0	903	

Land Fair Cash Val: 2,709 Building Fair Cash Val: 0 Non-Farm Value: 2,709

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History

<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/21/2006	\$22,000	2006R05896	No
11/12/2009	\$26,200	2009R06289	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-213-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-213-003-00 309 WASHINGTON ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DURBIN PAUL C & ANNA MARIE

Address to send notice if different than shown at left:

309 WASHINGTON AVE
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,173** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-213-003-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 90.84		ESTIMATED 2024 Taxes: \$ 89.53	
Legal Description THIRD EXT JEISYVILLE LT 5 BLK 11 151673.000 93-04098 44.63X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,190	0	0	0	1,190	
	2024	1,173	0	0	0	1,173	

Land Fair Cash Val: 3,519 Building Fair Cash Val: 0 **Non-Farm Value: 3,519**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-213-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-213-004-00 305 KINCAID ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WADKINS TIMOTHY &
CELESTE MORAN

305 KINCAID ST
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,413** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-213-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,659.08	ESTIMATED			2024 Taxes: \$ 1,787.09
Legal Description THIRD EXT JEISYVILLE 2 3 4 BLK 11 151672.001 66-181330 178X142 12-15-D	LTS 1	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	4,758	0	22,978	0	27,736	
		2024	4,690	0	24,723	0	29,413	

Land Fair Cash Val: 14,070 Building Fair Cash Val: 74,169 **Non-Farm Value: 88,239**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/14/2005	\$57,000	2005R07001	No
05/07/2021	\$80,000	2021R01882	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-213-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-214-001-00 209 S SECOND ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DANIELS AVERA LEO JR

Address to send notice if different than shown at left:

209 S 2ND ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,110** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-214-001-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED 2024 Taxes: \$ 0.00	
Legal Description SECOND EXT JEISYVILLE LTS 9 & 10 BLK 10 151646.000 100X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,147	0	3,404	0	6,551	
	2024	3,103	0	5,007	0	8,110	

Land Fair Cash Val: 9,309 Building Fair Cash Val: 15,021 **Non-Farm Value: 24,330**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	551
	OWNER OCCUPD	6000
	SEN FREEZE	0
2024	ELDERLY	2110
	OWNER OCCUPD	6000
	SEN FREEZE	0

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-214-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-214-002-00 304 KINCAID ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SUMMERS RON

Address to send notice if different than shown at left:

304 KINCAID ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,064** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-214-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,383.54	ESTIMATED			2024 Taxes: \$ 1,455.13
Legal Description SECOND EXT JEISYVILLE LOTS 6 7 & 8 BLK 10 151645.000 1984R03889 123.7X142 12-15-D 1989R07317	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,892	0	20,234	0	24,126		
	2024	3,837	0	21,227	0	25,064		

Land Fair Cash Val: 11,511 Building Fair Cash Val: 63,681 **Non-Farm Value: 75,192**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-214-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-214-005-00 305 GOLDIE ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAVIS LAWRENCE W JR

Address to send notice if different than shown at left:

305 GOLDIE ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,616** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-214-005-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,023.80		ESTIMATED 2024 Taxes: \$ 1,115.62	
Legal Description SECOND EXT JEISYVILLE LTS 3 4 & 5 BLK 10 151641.000 128.7X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,051	0	20,362	0	24,413	
	2024	3,993	0	21,623	0	25,616	

Land Fair Cash Val: 11,979 Building Fair Cash Val: 64,869 **Non-Farm Value: 76,848**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY OWNER OCCUPD	5000
2024	ELDERLY OWNER OCCUPD	6000
2023	ELDERLY OWNER OCCUPD	5000
2024	ELDERLY OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-214-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-214-006-00 203 S SECOND ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RULE KENT E & CATHY

Address to send notice if different than shown at left:

PO BOX 725
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,833** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-214-006-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,632.68		ESTIMATED		2024 Taxes: \$ 1,742.82
Legal Description SECOND EXT JEISYVILLE LTS 1 & 2 BLK 10 151639.000 100X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,147	0	29,243	0	32,390		
	2024	3,103	0	30,730	0	33,833		

Land Fair Cash Val: 9,309 Building Fair Cash Val: 92,190 **Non-Farm Value: 101,499**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/22/2007	\$80,000	2007R01393	Yes
05/03/2017	\$78,000	2017R01606	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-214-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-215-001-00 300 GOLDIE ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

FERRARI MARTIN

Address to send notice if different than shown at left:

304 GOLDIE ST
TAYLORVILLE IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$3,103 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 9,309 Building Fair Cash Val: 0 Non-Farm Value: 9,309

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? (Sales History)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-215-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-215-002-00 304 GOLDIE ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FERRARI MARTIN

Address to send notice if different than shown at left:

304 GOLDIE ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,930** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-15-215-002-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description JEISYVILLE EXTENDED LT 8 BLK 9 2004R03664(QCD) 151625.000 90-03936 50X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	1,575	0	2,772	0	4,347		
	2024	1,550	0	2,380	0	3,930		

Land Fair Cash Val: 4,650 Building Fair Cash Val: 7,140 **Non-Farm Value: 11,790**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	3847
<u>Tax Year</u> 2024 OWNER OCCUPD ELDERLY	3430 500

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/01/1990	\$4,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-215-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-215-003-00 308 GOLDIE ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAVIS VELMA I

Address to send notice if different than shown at left:

305 GOLDIE ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,937** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-215-003-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 150.00		ESTIMATED	2024 Taxes: \$ 147.85
Legal Description JEISYVILLE EXTENDED LTS 6 & 7 BLK 9 151623.000 73.7X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	1,965	0	0	0	1,965	
	2024	1,937	0	0	0	1,937	

Land Fair Cash Val: 5,811 Building Fair Cash Val: 0 Non-Farm Value: 5,811

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History
Tax Year Amount

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-215-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-215-004-00 307 S EAST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BAIRD JESSICA

Address to send notice if different than shown at left:

307 S EAST ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,557** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-215-004-00	Class 0040	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 950.84		ESTIMATED 2024 Taxes: \$ 1,111.12	
Legal Description JEISYVILLE EXTENDED LTS 3 4 5 BLK 9 MHRE 151622.000 2004R03147 113.7X142 12-15-D 94-6917	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,297	0	15,160	0	18,457	
	2024	3,250	0	17,307	0	20,557	

Land Fair Cash Val: 9,750 Building Fair Cash Val: 51,921 **Non-Farm Value: 61,671**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/17/2007	\$47,500	2007R04524	No
06/14/2017	\$45,000	2017R02164	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-215-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-215-005-00 303 EAST ST TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

THOMAS EDWARD W & CAROLYN A

Address to send notice if different than shown at left:

102 S 2ND ST
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,627** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-215-005-00	Class 0030	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 203.50		ESTIMATED		2024 Taxes: \$ 200.52
Legal Description JEISYVILLE EXTENDED LOTS 1 & 2 BLK 9 1976R07467 151619.000 1987R20005 100X142 12-15-D	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,666	0	0	0	2,666		
	2024	2,627	0	0	0	2,627		

Land Fair Cash Val: 7,881 Building Fair Cash Val: 0 **Non-Farm Value: 7,881**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1987	\$1,200		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-215-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-300-001-00 TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MESSERSMITH BARBARA A TRUSTEE

Address to send notice if different than shown at left:

307 SUNRISE CIR
GROVE OK 74344

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,299** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-300-001-00	Class 0021	Acreage 17.000	Print Date 9/23/2024	2023 Taxes: \$ 923.94		ESTIMATED		2024 Taxes: \$ 981.27
Legal Description W1/2 NW1/4 SW1/4 EX W320 S435 150154.000 91-04972	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	12,522	0	0	12,522		
	2024	0	13,299	0	0	13,299		

15-12-15-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-300-002-00 1528 N 600 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MULVANEY TREY & CHLOE

Address to send notice if different than shown at left:

1528 N 600 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$68,213** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-300-002-00	Class 0010	Acreage 3.000	Print Date 9/23/2024	2023 Taxes: \$ 4,475.82	ESTIMATED			2024 Taxes: \$ 4,590.40
Legal Description W320 S435 NW1/4 SW1/4 150154.001 92-07024	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	11,420	0	55,240	0	66,660		
	2024	11,253	0	56,960	0	68,213		

Land Fair Cash Val: 33,759 Building Fair Cash Val: 170,880 **Non-Farm Value: 204,639**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/1992	\$78,000		Yes
04/15/2013	\$150,000	2013R01570	Yes
04/11/2018	\$186,000	2018R01067	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-15-300-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-300-003-00 TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEXHEIMER FARMS INC

Address to send notice if different than shown at left:

470 N 1150 EAST RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$95,459** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-300-003-00	Class 0021	Acreage 140.000	Print Date 9/23/2024	2023 Taxes: \$ 6,564.68		ESTIMATED	2024 Taxes: \$ 7,043.46
Legal Description SW1/4 EX W1/2 NW1/4 SW1/4 150155.000 76-8878	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	88,970	0	0	88,970	
	2024	0	95,459	0	0	95,459	

15-12-15-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-400-001-00 TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DALE A & JULIE A TRUSTEES

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$80,744** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-400-001-00	Class 0021	Acreage 110.000	Print Date 9/23/2024	2023 Taxes: \$ 5,591.66		ESTIMATED	2024 Taxes: \$ 5,957.71
Legal Description W110.00AC SE1/4 150156.000 90-05020 93-01068	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	75,783	0	0	75,783	
	2024	0	80,744	0	0	80,744	

15-12-15-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-400-002-00 TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

EGGIMANN DALE A & JULIE A TTEE

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$52,064 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-15-400-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Yes/No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-15-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-15-700-001-00	Class 7100	Acreage 600.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING ALL SEC EX NW NW 600A MINED OUT 157714.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-12-15-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$46,110** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-16-100-001-00	Class 0083	Acreage 49.898	Print Date 9/23/2024	2023 Taxes: \$ 3,302.92		ESTIMATED		2024 Taxes: \$ 3,402.24
Legal Description NW1/4 SANGCHRIS LAKE 49.898AC IS FOR SANGCHRIS LAKE 98-01242 150162.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	44,764	0	0	0	44,764		
	2024	46,110	0	0	0	46,110		

Land Fair Cash Val: 138,330 Building Fair Cash Val: 0 **Non-Farm Value: 138,330**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-16-100-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-100-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ZAUBI STEPHEN

Address to send notice if different than shown at left:

301 N OLD COVERED BRIDGE LN
 SPRINGFIELD IL 62711

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,148** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-16-100-001-01	Class 0021	Acreage 35.660	Print Date 9/23/2024	2023 Taxes: \$ 285.62		ESTIMATED	2024 Taxes: \$ 306.06
Legal Description FARM TRACT #17 PART N1/2 NW1/4 98-02544 USDA CREP	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	3,871	0	0	3,871	
	2024	0	4,148	0	0	4,148	

15-12-16-100-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-100-001-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

3D FAMILY FARMS
%JOHN R & DARLA HOLMES

7549 PARKTRACE LN SE
OWENS X RDS AL 35763

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,204** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-16-100-001-02	Class 0021	Acreage 39.280	Print Date 9/23/2024	2023 Taxes: \$ 287.48		ESTIMATED	2024 Taxes: \$ 310.19
Legal Description FARM TRACT #18 S1/2 NW1/4 LY S & W OF SANGCHRIS LAKE & N1/2 NW1/4 S & W OF SANGCHIRS LAKE & EX FOR 1.00AC IN SW COR & EX 17.43 ACRES 1998R02165	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	3,896	0	0	3,896	
	2024	0	4,204	0	0	4,204	

15-12-16-100-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-100-001-03 1562 N 500 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

ELMORE MARK A & MARGARET A

Address to send notice if different than shown at left:

1562 N 500 EAST RD
PAWNEE IL 62558

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$83,577 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 30,120 Building Fair Cash Val: 207,840 Non-Farm Value: 237,960

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Exemption History, Amount, Tax Year 2023, Tax Year 2024.

Table with columns: Sales History, Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-16-100-001-03

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-100-002-00 1568 N 500 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOORE DARREL & CHERYL

Address to send notice if different than shown at left:

1568 N 500 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,820** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-16-100-002-00	Class 0010	Acreage 3.000	Print Date 9/23/2024	2023 Taxes: \$ 1,654.04		ESTIMATED	2024 Taxes: \$ 1,388.64
Legal Description W210 S1/2 NW1/4 NW1/4 150161.000 94-04075	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	11,420	0	16,997	0	28,417	
	2024	11,253	0	13,567	0	24,820	

Land Fair Cash Val: 33,759 Building Fair Cash Val: 40,701 **Non-Farm Value: 74,460**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-16-100-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-100-003-00 1550 N 500 EAST PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BERTOLDO BRIAN L II

Address to send notice if different than shown at left:

1550 N 500 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$60,003** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-16-100-003-00	Class 0011	Acreage 5.000	Print Date 9/23/2024	2023 Taxes: \$ 3,367.64	ESTIMATED			2024 Taxes: \$ 3,837.05
Legal Description BEG SW COR SW1/4 NW1/4 E708.71' S308.20' W704.75' N306.71' TO POB 1999R00923 150163.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,924	2,420	44,297	0	53,641		
	2024	8,427	2,286	49,290	0	60,003		

15-12-16-100-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD Disabled Person	6000 2000
2024	OWNER OCCUPD Disabled Person	6000 2000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/25/2007	\$24,000	2007R05214	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAMBACHER LAWRENCE PRES

Address to send notice if different than shown at left:

957 E 1500 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$49,907** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: PROPERTY DIVIDED INTO SEPARATE TAX BILLS

Parcel Number 15-12-16-200-001-00	Class 0021	Acreage 77.250	Print Date 9/23/2024	2023 Taxes: \$ 3,447.10		ESTIMATED	2024 Taxes: \$ 3,682.40
Legal Description FARM TRACT #20 BEG 396.30' W NE COR NW1/4 THENCE E1071.50' S1322.28' E676.57' S1322.98' E1340.96' S66.00' W1360.00' S183.53' W & NORTHLY ALONG	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	46,718	0	0	46,718	
	2024	0	49,907	0	0	49,907	

15-12-16-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/04/2023	\$213,640	2023R00022	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-200-001-01

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

CHRISTIAN COUNTY FARMERS SUPPLY CO
DBA CENTRAL COMMODITY FS OF TAYLORVI
1210 N CHENEY ST
PO BOX 377
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property,
appeals this assessment of said property at \$8,840 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for PROPERTY DIVIDED INTO SEPARATE TAX BILLS
Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-12-16-200-001-01

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 01/04/2023, \$213,640, 2023R00022, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-200-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SANDSTONE CREEK LLC
%BRUCE NATION

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,186** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-16-200-002-00	Class 0021	Acreage 18.250	Print Date 9/23/2024	2023 Taxes: \$ 1,057.34		ESTIMATED	2024 Taxes: \$ 1,120.50
Legal Description E1/2 NW1/4 NE1/4 150158.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	14,330	0	0	14,330	
	2024	0	15,186	0	0	15,186	

15-12-16-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
07/20/2015	\$2,140,000	2015R02819	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-200-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SANDSTONE CREEK LLC
%BRUCE NATION

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,632** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-16-200-003-00	Class 0011	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 2,345.86		ESTIMATED		2024 Taxes: \$ 2,481.54
Legal Description NE1/4 NE1/4 150157.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	28,793	0	3,000	31,793		
	2024	0	30,632	0	3,000	33,632		

15-12-16-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
07/20/2015	\$2,140,000	2015R02819	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-200-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MESSERSMITH BARBARA A TRUSTEE

Address to send notice if different than shown at left:

307 SUNRISE CIR
GROVE

OK 74344

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,103** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-16-200-004-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 2,011.10		ESTIMATED		2024 Taxes: \$ 2,147.37
Legal Description SE1/4 NE1/4 150159.000 91-04972	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	27,256	0	0	27,256		
	2024	0	29,103	0	0	29,103		

15-12-16-200-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,000** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-16-300-001-00	Class 0083	Acreage 20.583	Print Date 9/23/2024	2023 Taxes: \$ 1,360.82		ESTIMATED		2024 Taxes: \$ 1,401.92
Legal Description SW1/4 SANGCHRIS LAKE 20.583AC IS FOR SANGCHRIS LAKE 150164.000 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	18,443	0	0	0	18,443		
	2024	19,000	0	0	0	19,000		

Land Fair Cash Val: 57,000 Building Fair Cash Val: 0 **Non-Farm Value: 57,000**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-16-300-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-300-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

3D FAMILY FARMS
%JOHN R & DARLA HOLMES

7549 PARKTRACE LN SE
OWENS X RDS AL 35763

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$61,685** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-16-300-001-01	Class 0021	Acreage 108.440	Print Date 9/23/2024	2023 Taxes: \$ 4,239.18		ESTIMATED	2024 Taxes: \$ 4,551.44
Legal Description FARM TRACT #18 SW1/4 LY S & W SANGCHRIS LAKE EX 29.40AC 98-02165	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	57,453	0	0	57,453	
	2024	0	61,685	0	0	61,685	

15-12-16-300-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-300-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAMBACHER PUCETTI FARMS INC

979 E 1500 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,154** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-16-300-002-00	Class 0011	Acreage 29.400	Print Date 9/23/2024	2023 Taxes: \$ 1,611.10		ESTIMATED	2024 Taxes: \$ 1,708.42
Legal Description W3/4 SE1/4 SW1/4 EX TR SE COR 260E & 200S 150167.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	18,385	0	3,450	21,835	
	2024	0	19,704	0	3,450	23,154	

15-12-16-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAYMAN MARK & AMANDA

Address to send notice if different than shown at left:

1020 N 750 EAST RD
PALMER IL 62556

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$76,396** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-16-400-001-00	Class 0021	Acreage 123.360	Print Date 9/23/2024	2023 Taxes: \$ 5,252.10		ESTIMATED	2024 Taxes: \$ 5,636.89
Legal Description FARM TRACT #21 BEG SE COR SE1/4 W1483.50 N440 W495 S440 W580.50 TO SANGCHRIS LK 98-02868 150170.000 NELY183.53 E1360 S2579.74	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	71,181	0	0	71,181	
	2024	0	76,396	0	0	76,396	

15-12-16-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-400-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,900** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-16-400-001-01	Class 0083	Acreage 24.758	Print Date 9/23/2024	2023 Taxes: \$ 1,638.34		ESTIMATED	2024 Taxes: \$ 1,689.68
Legal Description SE1/4 SANGCHRIS LAKE 24.758AC IS FOR SANGCHRIS LAKE 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	22,204	0	0	0	22,204	
	2024	22,900	0	0	0	22,900	

Land Fair Cash Val: 68,700 Building Fair Cash Val: 0 **Non-Farm Value: 68,700**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-16-400-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-400-002-00 579 E 1500 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VOCKS GREGORY A & DIANA E

Address to send notice if different than shown at left:

579 E 1500 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$87,963** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-16-400-002-00	Class 0010	Acreage 5.000	Print Date 9/23/2024	2023 Taxes: \$ 4,937.72		ESTIMATED		2024 Taxes: \$ 4,931.06
Legal Description FARM TRACT #22 BEG SE COR SE1/4 W1483.50 W495 N440 E495 S440 TO BEG 150171.000 2002-07444 98-02269 98-04514	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	15,702	0	62,218	0	77,920		
	2024	15,473	0	72,490	0	87,963		

Land Fair Cash Val: 46,419 Building Fair Cash Val: 217,470 **Non-Farm Value: 263,889**

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY IMPROVEMENT	6000 5000 10133

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2002	\$120,000		Yes
09/02/2015	\$150,000	2015R03479	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-16-400-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-16-700-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-16-700-002-00	Class 7100	Acreage 120.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING S3/4 E1/4 157715.001 96-01186 ALL MINED OUT	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-12-16-700-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-17-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DOWSON JOHN & NANCY FAMILY II LP

2409 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$58,570** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-17-100-001-00	Class 0021	Acreage 81.280	Print Date 9/23/2024	2023 Taxes: \$ 4,042.84	ESTIMATED			2024 Taxes: \$ 4,321.60
Legal Description N1/2 NW1/4 2006R01299 2005R03265 2004R01634 1999R01192 1999R01191 150177.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	54,792	0	0	54,792		
	2024	0	58,570	0	0	58,570		

15-12-17-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Exemption History **Amount**
Tax Year

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1999	\$138,522		Yes
04/08/2013	\$259,135	2013R01491	No
04/17/2020	\$1,516,000	2020R01284	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-17-100-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DALE A & JULIE A TTEE

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,627** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-17-100-002-00	Class 0021	Acreage 29.730	Print Date 9/23/2024	2023 Taxes: \$ 1,566.76		ESTIMATED	2024 Taxes: \$ 1,669.54
Legal Description E29.73AC S1/2 NW1/4 150174.001 2001-01661	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	21,234	0	0	21,234	
	2024	0	22,627	0	0	22,627	

15-12-17-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-17-100-002-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN CAROLYN R TTEE

Address to send notice if different than shown at left:

1496 N 175 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$36,532** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-17-100-002-01	Class 0021	Acreage 50.270	Print Date 9/23/2024	2023 Taxes: \$ 2,523.90		ESTIMATED	2024 Taxes: \$ 2,695.52
Legal Description W1650 S1/2 NW1/4 150174.004 2001-03026 93-00518	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	34,206	0	0	34,206	
	2024	0	36,532	0	0	36,532	

15-12-17-100-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-17-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DOWSON JOHN & NANCY FAMILY II LP

Address to send notice if different than shown at left:

2409 W BOARMAN RD
DIVERNON IL 62530

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,227** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-17-200-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 2,020.84		ESTIMATED	2024 Taxes: \$ 2,156.52
Legal Description NW1/4 NE1/4 2006R01299 2005R03265 2004R01634 1999R01191 150173.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	27,388	0	0	27,388	
	2024	0	29,227	0	0	29,227	

15-12-17-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
04/08/2013	\$259,135	2013R01491	No
04/17/2020	\$1,516,000	2020R01284	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-17-200-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,157** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-17-200-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 2,162.64		ESTIMATED	2024 Taxes: \$ 2,298.93
Legal Description NE1/4 NE1/4 150172.000 90-02720 85-7905	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	29,310	0	0	29,310	
	2024	0	31,157	0	0	31,157	

15-12-17-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/01/2005	\$909,600	2005R06744	No
01/29/2019	\$1,679,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-17-200-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DALE A & JULIE A TTEE

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,972** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-17-200-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,925.58		ESTIMATED	2024 Taxes: \$ 2,063.92
Legal Description SW1/4 NE1/4 150174.002 2001-01661	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	26,097	0	0	26,097	
	2024	0	27,972	0	0	27,972	

15-12-17-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-17-200-004-00 1551 N 500 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DOWSON JOHN & NANCY FAMILY II LP

2382 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$102,046** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-17-200-004-00	Class 0011	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 7,220.48		ESTIMATED	2024 Taxes: \$ 7,529.48
Legal Description SE1/4 NE1/4 150176.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	7,309	26,780	54,769	9,000	97,858	
	2024	6,540	29,703	56,803	9,000	102,046	

15-12-17-200-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
05/09/2024	\$1,800,000	2024R01295	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-17-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DALE A & JULIE A TTEE

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,256** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-17-300-001-00	Class 0021	Acreage 29.730	Print Date 9/23/2024	2023 Taxes: \$ 1,467.22		ESTIMATED	2024 Taxes: \$ 1,568.38
Legal Description E29.73AC N1/2 SW1/4 150174.000 2001-01661	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	19,885	0	0	19,885	
	2024	0	21,256	0	0	21,256	

15-12-17-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-17-300-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN CAROLYN R TTEE

Address to send notice if different than shown at left:

1496 N 175 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$47,309** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: RESIDENTIAL BUILDING REMOVED.

Parcel Number 15-12-17-300-001-01	Class 0011	Acreage 50.270	Print Date 9/23/2024	2023 Taxes: \$ 3,329.20		ESTIMATED	2024 Taxes: \$ 3,490.70
Legal Description W1650' N1/2 SW1/4 2001R03026 1993R00518 150174.003	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	3,638	35,482	0	6,000	45,120	
	2024	3,587	37,722	0	6,000	47,309	

15-12-17-300-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-17-300-002-00 414 E 1525 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DALE A & JULIE A TRUSTEES

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$39,097** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: PROPERTY RE-ASSESSED DUE TO FIRE DAMAGE

Parcel Number 15-12-17-300-002-00	Class 0011	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 2,797.12		ESTIMATED		2024 Taxes: \$ 2,884.78
Legal Description SW1/4 SW1/4 150180.000		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	4,851	26,623	6,435	0	37,909	
		2024	4,783	28,437	5,877	0	39,097	

15-12-17-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-17-300-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,441** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-17-300-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,670.36		ESTIMATED	2024 Taxes: \$ 1,803.38
Legal Description SE1/4 SW1/4 150179.000 2001-06392	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	22,638	0	0	22,638	
	2024	0	24,441	0	0	24,441	

15-12-17-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
04/17/2020	\$500,000	2020R01280	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-17-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN CAROLYN R TTEE

Address to send notice if different than shown at left:

1496 N 175 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,918** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-17-400-001-00	Class 0021	Acreage 40.330	Print Date 9/23/2024	2023 Taxes: \$ 1,630.14		ESTIMATED		2024 Taxes: \$ 1,764.79
Legal Description NW1/4 SE1/4 150181.000 2001-01441 2001-00394	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	22,093	0	0	22,093		
	2024	0	23,918	0	0	23,918		

15-12-17-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-17-400-002-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

DOWSON JOHN & NANCY FAMILY II LP

2382 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$30,763 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-17-400-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 05/09/2024, \$1,800,000, 2024R01295, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-17-400-002-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$57,466** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-17-400-002-01	Class 0021	Acreage 80.640	Print Date 9/23/2024	2023 Taxes: \$ 3,968.02		ESTIMATED	2024 Taxes: \$ 4,240.14
Legal Description S1/2 SE1/4 97-06634/35	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	53,778	0	0	53,778	
	2024	0	57,466	0	0	57,466	

15-12-17-400-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/01/2005	\$909,600	2005R06744	No
01/29/2019	\$1,679,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-18-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRACKEBUSCH FAMILY LLC

Address to send notice if different than shown at left:

19032 STATE HIGHWAY UU
MILLERSVILLE MO 63766

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$51,958** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-18-100-001-00	Class 0021	Acreage 85.070	Print Date 9/23/2024	2023 Taxes: \$ 3,608.48		ESTIMATED	2024 Taxes: \$ 3,833.73
Legal Description FARM TRACT #28 NW1/4 LY E OF SANGCHRIS LAKE 150187.001 98-01873	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	48,905	0	0	48,905	
	2024	0	51,958	0	0	51,958	

15-12-18-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-18-100-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAMBACHER BLANCHE AS TRUSTEE
 957 E 1500 NORTH RD
 TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,922** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-18-100-001-01	Class 0021	Acreage 36.000	Print Date 9/23/2024	2023 Taxes: \$ 1,799.56		ESTIMATED	2024 Taxes: \$ 1,912.66
Legal Description FARM TRACT #29 NW1/4 LY N&W OF SANGCHRIS LAKE 98-01632	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	24,389	0	0	24,389	
	2024	0	25,922	0	0	25,922	

15-12-18-100-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
 Signed: _____ Date ___ / ___ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-18-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2356 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,140** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-18-200-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 2,233.12		ESTIMATED	2024 Taxes: \$ 2,371.46
Legal Description NW1/4 NE1/4 150184.000 90-01403 90-01404 90-01405		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL
		2023	0	30,265	0	0	30,265
		2024	0	32,140	0	0	32,140

15-12-18-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/29/2017	\$2,950,425	2017R04649	No
01/29/2019	\$16,792,275	2019R00312	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-18-200-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JDI FARMS INC

2382 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$91,195** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-18-200-002-00	Class 0021	Acreage 120.000	Print Date 9/23/2024	2023 Taxes: \$ 6,320.38		ESTIMATED	2024 Taxes: \$ 6,728.84
Legal Description NE1/4 NE1/4 & S1/2 NE1/4 150183.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	85,659	0	0	85,659	
	2024	0	91,195	0	0	91,195	

15-12-18-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/13/2019	\$1,320,000	2019R02688	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-18-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRACKEBUSCH FAMILY LLC

Address to send notice if different than shown at left:

19032 STATE HIGHWAY UU
MILLERSVILLE MO 63766

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$48,532** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-18-300-001-00	Class 0021	Acreage 61.760	Print Date 9/23/2024	2023 Taxes: \$ 3,374.94		ESTIMATED	2024 Taxes: \$ 3,580.94
Legal Description N1/2 SW1/4 FARM TRACT #28 150187.000 98-01873	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	45,740	0	0	45,740	
	2024	0	48,532	0	0	48,532	

15-12-18-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-18-300-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON MARY H MARITAL TR
%MICHAEL MEGGINSON TRUSTEE

2328 TARA LN
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$45,655** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-18-300-002-00	Class 0021	Acreage 61.000	Print Date 9/23/2024	2023 Taxes: \$ 3,206.04		ESTIMATED	2024 Taxes: \$ 3,368.66
Legal Description S1/4 W1/2 150186.000 89-8133	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	42,879	0	0	42,879	
	2024	0	45,655	0	0	45,655	

15-12-18-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-18-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2382 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$62,045** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-18-400-001-00	Class 0011	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 4,414.80		ESTIMATED	2024 Taxes: \$ 4,578.00
Legal Description N1/2 SE1/4 150183.000 76-8180	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	4,783	51,909	3,141	0	59,833	
	2024	4,713	55,542	1,790	0	62,045	

15-12-18-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/13/2019	\$1,760,000	2019R02687	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-18-400-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON MARY H MARITAL TR
%MICHAEL MEGGINSON TRUSTEE

2328 TARA LN
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,581** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-18-400-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,898.80		ESTIMATED	2024 Taxes: \$ 2,035.07
Legal Description SW1/4 SE1/4 150190.000 89-8133	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	25,734	0	0	25,734	
	2024	0	27,581	0	0	27,581	

15-12-18-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-18-400-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JC DOWSON INC

2382 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,850** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-18-400-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,771.08		ESTIMATED	2024 Taxes: \$ 1,907.35
Legal Description SE1/4 SE1/4 150189.000 76-8179	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	24,003	0	0	24,003	
	2024	0	25,850	0	0	25,850	

15-12-18-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/13/2019	\$1,760,000	2019R02687	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-19-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON MARY H MARITAL TR
%MICHAEL MEGGINSON TRUSTEE

2328 TARA LN
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$23,797** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-19-100-001-00	Class 0021	Acreage 32.000	Print Date 9/23/2024	2023 Taxes: \$ 1,465.98		ESTIMATED	2024 Taxes: \$ 1,534.30
Legal Description NORTH SIDE NW1/4 150194.000 89-8133	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	22,328	0	0	22,328	
	2024	0	23,797	0	0	23,797	

15-12-19-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-19-100-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILLER DIANE ORLANDINI FAMILY LLC
%DIANE M MILLER

6117 GREENWALT DR
SPRINGFIELD IL 62711

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$67,042** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-19-100-002-00	Class 0021	Acreage 90.000	Print Date 9/23/2024	2023 Taxes: \$ 4,144.56		ESTIMATED	2024 Taxes: \$ 4,322.51
Legal Description SOUTH SIDE NW1/4 150195.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	62,907	0	0	62,907	
	2024	0	67,042	0	0	67,042	

15-12-19-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-19-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON MARY H MARITAL TR
%MICHAEL MEGGINSON TRUSTEE

2328 TARA LN
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,278** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-19-200-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,801.30		ESTIMATED	2024 Taxes: \$ 1,887.69
Legal Description NW1/4 NE1/4 150192.000 89-8133	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	27,365	0	0	27,365	
	2024	0	29,278	0	0	29,278	

15-12-19-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-19-200-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JC DOWSON INC

2382 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,032** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-19-200-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,622.00		ESTIMATED	2024 Taxes: \$ 1,742.88
Legal Description NE1/4 NE1/4 150191.000 76-8179	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	25,157	0	0	25,157	
	2024	0	27,032	0	0	27,032	

15-12-19-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/13/2019	\$1,760,000	2019R02687	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-19-200-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC
%JOSEPH A BLOOME PRES

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$50,474** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-19-200-003-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,045.96		ESTIMATED	2024 Taxes: \$ 3,254.30
Legal Description S1/2 NE1/4 2002-07682 150193.000 96-03167 96-03166	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	46,686	0	0	46,686	
	2024	0	50,474	0	0	50,474	

15-12-19-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-19-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC
%JOSEPH A BLOOME PRES

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$85,272** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-19-300-001-00	Class 0021	Acreage 119.790	Print Date 9/23/2024	2023 Taxes: \$ 5,241.66		ESTIMATED	2024 Taxes: \$ 5,497.89
Legal Description SW1/4 EX BEG SW COR SW1/4 E750.48 N380 E60 N65 2002-07682 150193.002 96-03165,66&67 E164.7 S445 W224.70 TO BEG	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	79,825	0	0	79,825	
	2024	0	85,272	0	0	85,272	

15-12-19-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-19-300-001-01 319 E 1400 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ABSHIRE BRIAN K

Address to send notice if different than shown at left:

319 E 1400 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$75,354** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-19-300-001-01	Class 0010	Acreage 2.206	Print Date 9/23/2024	2023 Taxes: \$ 4,327.86		ESTIMATED	2024 Taxes: \$ 4,471.58	
Legal Description BEG SW COR SW1/4 E750.48 N380 E60 N65 E164.7 S445 W224.7 150193.004 92-05529	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,705	0	63,420	0	73,125		
	2024	9,567	0	65,787	0	75,354		

Land Fair Cash Val: 28,701 Building Fair Cash Val: 197,361 **Non-Farm Value: 226,062**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1992	\$60,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-19-300-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-19-400-001-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BLOOME FARMS INC
%JOSEPH A BLOOME PRES

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$32,585 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-19-400-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-19-400-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC
%JOSEPH A BLOOME PRES

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$49,645** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-19-400-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 2,961.26		ESTIMATED		2024 Taxes: \$ 3,200.85
Legal Description E1/2 SE1/4 2002-07682 150193.001 78-19326		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	45,929	0	0	45,929	
		2024	0	49,645	0	0	49,645	

15-12-19-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/1978	\$280,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-20-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DALE A & JULIE A TRUSTEES

Address to send notice if different than shown at left:

658 E 1575 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,616** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-20-100-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,788.60		ESTIMATED	2024 Taxes: \$ 1,909.48
Legal Description NW1/4 NW1/4 150199.000 96-01186 93-01068	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	27,741	0	0	27,741	
	2024	0	29,616	0	0	29,616	

15-12-20-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-20-100-002-00 1497 N 445 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2382 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,816** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-20-100-002-00	Class 0011	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 2,420.12		ESTIMATED	2024 Taxes: \$ 2,502.65
Legal Description NE 1/4 NW 1/4 150198.000 2001-06392 B49 P443	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,710	26,947	4,879	0	37,536	
	2024	5,627	28,756	4,433	0	38,816	

15-12-20-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
04/20/2020	\$1,500,000	2020R01319	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-20-100-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J C DOWSON INC

2382 W BOARMAN RD
DIVERNON IL 62530

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$51,697** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-20-100-003-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,093.24		ESTIMATED	2024 Taxes: \$ 3,333.15
Legal Description S1/2 NW1/4 150200.000 2001-06392	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	47,976	0	0	47,976	
	2024	0	51,697	0	0	51,697	

15-12-20-100-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
04/20/2020	\$1,500,000	2020R01319	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-20-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAMBACHER PUCETTI FARMS INC

Address to send notice if different than shown at left:

979 E 1500 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$110,514** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-20-200-001-00	Class 0021	Acreage 161.500	Print Date 9/23/2024	2023 Taxes: \$ 6,646.06		ESTIMATED	2024 Taxes: \$ 7,125.36
Legal Description NE 1/4 150197.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	103,080	0	0	103,080	
	2024	0	110,514	0	0	110,514	

15-12-20-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-20-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DOWSON JOHN & NANCY FAMILY II LP

Address to send notice if different than shown at left:

2409 W BOARMAN RD
DIVERNON IL 62530

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$56,283** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-20-300-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,388.92		ESTIMATED	2024 Taxes: \$ 3,628.83
Legal Description W1/2 SW1/4 150202.000 2001-06392	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	52,562	0	0	52,562	
	2024	0	56,283	0	0	56,283	

15-12-20-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
04/17/2020	\$1,000,000	2020R01286	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-20-300-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HUGGINS CHERYL K & SHERYL E TOLLY

Address to send notice if different than shown at left:

613 VIRGINIA AVE
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$54,380** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-20-300-002-00	Class 0021	Acreage 77.000	Print Date 9/23/2024	2023 Taxes: \$ 3,277.90		ESTIMATED	2024 Taxes: \$ 3,506.13
Legal Description E 1/2 SW 1/4 EX S305 E430 SE 1/4 SW 1/4 150201.000 95-03873	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	50,840	0	0	50,840	
	2024	0	54,380	0	0	54,380	

15-12-20-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-20-300-003-00 449 E 1400 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NIEHAUS GREGORY A

Address to send notice if different than shown at left:

449 E 1400 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,633** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-20-300-003-00	Class 0010	Acreage 3.000	Print Date 9/23/2024	2023 Taxes: \$ 1,194.40	ESTIMATED			2024 Taxes: \$ 1,271.12
Legal Description S305 E430 SE1/4 SW1/4 MHRE 150201.001 87-22240	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	11,420	0	15,023	0	26,443		
	2024	11,253	0	16,380	0	27,633		

Land Fair Cash Val: 33,759 Building Fair Cash Val: 49,140 **Non-Farm Value: 82,899**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 1918
2024	OWNER OCCUPD IMPROVEMENT	6000 1918

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-20-300-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-20-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

3D FAMILY FARMS
%JOHN R & DARLA HOLMES

7549 PARKTRACE LN SE
OWENS X RDS AL 35763

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$111,082** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-20-400-001-00	Class 0021	Acreage 156.720	Print Date 9/23/2024	2023 Taxes: \$ 6,726.20		ESTIMATED	2024 Taxes: \$ 7,161.98
Legal Description SE1/4 EX S640' E323' THEREOF 150203.000 2003R09928 2003R01613 99-06137 99-05155&6	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	104,323	0	0	104,323	
	2024	0	111,082	0	0	111,082	

15-12-20-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/18/2005	\$195,000	2005R00270	No
01/18/2005	\$195,000	2005R00271	No
01/18/2005	\$195,000	2005R00272	No
01/18/2005	\$195,000	2005R00273	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-20-400-002-00 497 E 1400 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LOVEKAMP BRYCE WILLIAM

Address to send notice if different than shown at left:

497 E 1400 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$147,429** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-20-400-002-00	Class 0011	Acreage 4.740	Print Date 9/23/2024	2023 Taxes: \$ 8,459.66	ESTIMATED			2024 Taxes: \$ 9,118.59
Legal Description LOVEKAMP ADDITION LOTS 1 & 2 1990R04697 150204.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,077	1,074	57,458	71,600	137,209		
	2024	7,160	1,142	67,027	72,100	147,429		

15-12-20-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/22/2010	\$50,000	2010R01175	No
03/22/2010	\$25,000	2010R01177	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-21-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAVIS EMIL C MRS ESTATE
%MARTHA ANN GIESEKE GREEN

2336 S NOBLE AVE
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$85,004** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-21-100-001-00	Class 0011	Acreage 101.810	Print Date 9/23/2024	2023 Taxes: \$ 5,187.64		ESTIMATED	2024 Taxes: \$ 5,480.61
Legal Description N240' W455' E1000' NW1/4 PART W OF E1000 NW1/4 150205.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	67,360	0	13,100	80,460	
	2024	0	71,904	0	13,100	85,004	

15-12-21-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-21-100-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREEN THOMAS & MARTHA

Address to send notice if different than shown at left:

2336 S NOBLE AVE
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,288** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-21-100-002-00	Class 0021	Acreage 34.440	Print Date 9/23/2024	2023 Taxes: \$ 667.44		ESTIMATED	2024 Taxes: \$ 727.79
Legal Description FARM TRACT #25 PART E1/2 NW1/4 150205.001 98-01624	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	10,352	0	0	10,352	
	2024	0	11,288	0	0	11,288	

15-12-21-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-21-100-002-01

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$24,550 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

Land Fair Cash Val: 73,650 Building Fair Cash Val: 0 Non-Farm Value: 73,650

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? (Sales History)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-21-100-002-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-21-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JONES JEFFREY & MARIA

Address to send notice if different than shown at left:

17895 W KEWAUNEE DR
GRAYSLAKE IL 60030

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,009** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-21-200-001-00	Class 0011	Acreage 43.640	Print Date 9/23/2024	2023 Taxes: \$ 761.32		ESTIMATED		2024 Taxes: \$ 774.28
Legal Description FARM TRACT #23 PART E1/2 E1/2 NW1/4 & W1/2 W1/2 NE1/4 98-01503	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	11,808	0	0	11,808		
	2024	1,497	10,165	347	0	12,009		

15-12-21-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/10/1998	\$90,000	1998R1503	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-21-200-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LUCAS BETTY J

Address to send notice if different than shown at left:

62 W FAIRVIEW LN
SPRINGFIELD IL 62711

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$85,185** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-21-200-002-00	Class 0021	Acreage 120.000	Print Date 9/23/2024	2023 Taxes: \$ 5,159.40		ESTIMATED	2024 Taxes: \$ 5,492.28
Legal Description NE1/4 EX W1/2 W1/2 NE1/4 150206.000 92-3669	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	80,022	0	0	80,022	
	2024	0	85,185	0	0	85,185	

15-12-21-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-21-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

3D FAMILY FARMS
%JOHN R & DARLA HOLMES

7549 PARKTRACE LN SE
OWENS X RDS AL 35763

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,122** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-21-300-001-00	Class 0021	Acreage 32.830	Print Date 9/23/2024	2023 Taxes: \$ 1,522.18		ESTIMATED 2024 Taxes: \$ 1,619.73	
Legal Description N27.27AC W1/2 SW1/4 & W220 S1100 N2000 W1/2 SW1/4 150208.000 2003R09928 99-05155&6 99-06137 2003R01613	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	23,609	0	0	23,609	
	2024	0	25,122	0	0	25,122	

15-12-21-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Exemption History **Amount**
Tax Year

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/18/2005	\$195,000	2005R00270	No
01/18/2005	\$195,000	2005R00271	No
01/18/2005	\$195,000	2005R00272	No
01/18/2005	\$195,000	2004R00273	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-21-300-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GREEN THOMAS & MARTHA

Address to send notice if different than shown at left:

2336 S NOBLE AVE
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$63,830** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-21-300-002-00	Class 0021	Acreage 118.020	Print Date 9/23/2024	2023 Taxes: \$ 3,806.92		ESTIMATED	2024 Taxes: \$ 4,115.42
Legal Description FARM TRACT #25 BEG SW COR SW1/4 E1358.73 POB N644.06 W1100.13 N1099.79 E1100.13 N900.22 E TO WATER 150207.000 EDGE FOLLOW WATER EDGE	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	59,045	0	0	59,045	
	2024	0	63,830	0	0	63,830	

15-12-21-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-21-300-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LOVEKAMP BETTY M
REVOCABLE LIVING TRUST

1300 N LINCOLN AVE
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,041** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-21-300-003-00	Class 0021	Acreage 15.290	Print Date 9/23/2024	2023 Taxes: \$ 603.10		ESTIMATED	2024 Taxes: \$ 647.39
Legal Description S640 W1/2 SW1/4 EX W279 150208.001 2004R06203(QCD)	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	9,354	0	0	9,354	
	2024	0	10,041	0	0	10,041	

15-12-21-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-21-300-003-01 501 E 1400 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LOVEKAMP BRYCE WILLIAM

497 E 1400 NORTH RD
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,672** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-21-300-003-01	Class 0011	Acreage 4.100	Print Date 9/23/2024	2023 Taxes: \$ 2,485.18		ESTIMATED	2024 Taxes: \$ 2,493.37
Legal Description W279' S640' SW1/4 1990R04697 150208.002	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	1,545	0	37,000	38,545	
	2024	0	1,672	0	37,000	38,672	

15-12-21-300-003-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/22/2010	\$25,000	2010R01177	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-21-400-001-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BROWN BRIAN L &
CRYSTA L WEITEKAMP

575 E 1400 NORTH RD
PAWNEE IL 62558

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property,
appeals this assessment of said property at \$9,466 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-12-21-400-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 01/23/2009, \$142,337, 2009R00371, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-21-400-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SOUTH FORK TOWNSHIP

Address to send notice if different than shown at left:

PO BOX 258
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-21-400-001-01	Class 9900	Acreage 1.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description BEG W313.50 SE COR SW1/4 SE1/4 N220 W198 S220 E198 TO BEG BK176 PG163	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-21-400-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-21-400-001-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VISTRA ENERGY
ATTN: STATE & LOCAL TAX DEPARTMENT

PO BOX 219071
DALLAS TX 75221

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,500** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-21-400-001-02	Class 0083	Acreage 19.972	Print Date 9/23/2024	2023 Taxes: \$ 1,155.78		ESTIMATED	2024 Taxes: \$ 1,192.78
Legal Description E1/2 SW1/4 SANGCHRIS LAKE & W1/2 SE1/4 SANGCHRIS LAKE 19.972AC IS FOR SANGCHRIS LAKE 98-01242	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	17,926	0	0	0	17,926	
	2024	18,500	0	0	0	18,500	

Land Fair Cash Val: 55,500 Building Fair Cash Val: 0 **Non-Farm Value: 55,500**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-21-400-001-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-21-400-002-00 575 E 1400 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROWN BRIAN L &
CRYSTA L WEITEKAMP

575 E 1400 NORTH RD
PAWNEE IL 62558

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,867** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-21-400-002-00	Class 0011	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 1,526.26		ESTIMATED	2024 Taxes: \$ 1,578.73
Legal Description PART OF THE NW1/4 SE1/4 150209.000 2002-06832 90-05132	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	9,238	13,066	6,230	0	28,534	
	2024	9,100	13,880	5,887	0	28,867	

15-12-21-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	4862
<u>Tax Year</u> 2024 OWNER OCCUPD	4381

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/2002	\$125,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-21-400-003-00 583 E 1400 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LUCAS BETTY J

Address to send notice if different than shown at left:

62 W FAIRVIEW LN
SPRINGFIELD

IL 62711

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$58,081** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-21-400-003-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,517.56		ESTIMATED	2024 Taxes: \$ 3,744.76
Legal Description E1/2 SE1/4 150211.000 72-5039	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	54,557	0	0	54,557	
	2024	0	58,081	0	0	58,081	

15-12-21-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-22-100-001-00 640 E 1500 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JACKSON JORDAN & ABBY

Address to send notice if different than shown at left:

PO BOX 272
TOVEY

IL 62570

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,527** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: PROPERTY CHANGED FROM FARM TO NON-FARM CLASSIFICATION

Parcel Number 15-12-22-100-001-00	Class 0010	Acreage 3.070	Print Date 9/23/2024	2023 Taxes: \$ 1,203.42		ESTIMATED		2024 Taxes: \$ 1,710.32
Legal Description BEG NW COR NW1/4 E1784.83' TO THE POB S534.78' E251.88' N529.01' W251.72' TO POB 150214.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	11,261	0	7,404	0	18,665		
	2024	11,400	0	15,127	0	26,527		

Land Fair Cash Val: 34,200 Building Fair Cash Val: 45,381 **Non-Farm Value: 79,581**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-22-100-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-22-100-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEXHEIMER FARMS INC

Address to send notice if different than shown at left:

470 N 1150 EAST RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$81,235** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-22-100-001-01	Class 0021	Acreage 116.960	Print Date 9/23/2024	2023 Taxes: \$ 4,892.80		ESTIMATED	2024 Taxes: \$ 5,237.60
Legal Description BEG NW COR NW1/4 E1784.83' S534.78' E251.88' N529.01' E601.39' S1322.92' W1317.95' S1322.52' W1316.93' N2644.24' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	75,887	0	0	75,887	
	2024	0	81,235	0	0	81,235	

15-12-22-100-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/30/2007	\$614,051	2007R01526	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-22-100-002-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

PREMIERE PARTNERS IV LP
% MANULIFE INVESTMENT MANAGEMENT AC
301 E MAIN ST
TURLOCK CA 95380

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$28,319 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description (SE1/4 NW1/4) with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-12-22-100-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Rows for 12/19/2013, 11/03/2017, 06/06/2018)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-22-200-001-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

PREMIERE PARTNERS IV LP
% MANULIFE INVESTMENT MANAGEMENT AC
301 E MAIN ST
TURLOCK CA 95380

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$100,572 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed breakdown table for legal description NE 1/4 150212.000 96-02728 showing values for 2023 and 2024 across categories: HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-22-200-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (No for all entries)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-22-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PADOVAN LYNNE KAYE PELLEGRINI TTEE

Address to send notice if different than shown at left:

616 HALSEY AVE
CHARLESTON IL 61920

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$101,246** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-22-300-001-00	Class 0021	Acreage 140.000	Print Date 9/23/2024	2023 Taxes: \$ 6,109.56		ESTIMATED	2024 Taxes: \$ 6,527.81
Legal Description N1/2 SW1/4 SW1/4 & NW1/4 SW1/4 & E1/2 SW1/4 150215.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	94,759	0	0	94,759	
	2024	0	101,246	0	0	101,246	

15-12-22-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-22-300-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GESELL ROY A

Address to send notice if different than shown at left:

1387 N 600 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,749** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-22-300-002-00	Class 0021	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 957.64		ESTIMATED	2024 Taxes: \$ 1,015.41
Legal Description S1/2 OF SW1/4 SW1/4 150217.000 91-02860	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	14,853	0	0	14,853	
	2024	0	15,749	0	0	15,749	

15-12-22-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-22-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FULK HALLIE L JR

Address to send notice if different than shown at left:

1967 N 500 EAST RD
EDINBURG IL 62531

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,866** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-22-400-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,168.94		ESTIMATED	2024 Taxes: \$ 3,408.52
Legal Description W1/2 SE1/4 150220.000 90-00369	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	49,150	0	0	49,150	
	2024	0	52,866	0	0	52,866	

15-12-22-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/1988	\$125,600		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-22-400-001-01 1433 N 700 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

EGGIMANN CAROLYN R TTEE

Address to send notice if different than shown at left:

1496 N 175 EAST RD
PAWNEE IL 62558

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$62,137 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for legal description with columns for Year, Homesite/Lots, Farm Land, Buildings, Farm Bldgs, and Total.

15-12-22-400-001-01

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-22-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-22-700-001-00	Class 7100	Acreage 639.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING ALL EX 1A IN SE COR 639A MINED OUT 157721.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-12-22-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-100-001-00 710 E 1500 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BROWN TIMOTHY J & PATRICIA L

Address to send notice if different than shown at left:

710 E 1500 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$89,687** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-100-001-00	Class 0010	Acreage 12.000	Print Date 9/23/2024	2023 Taxes: \$ 4,757.34		ESTIMATED	2024 Taxes: \$ 5,395.69
Legal Description BEG NW COR NW1/4 E647.29' S365.41' E283.31' S307.68' W283.31' W663' N372.96' TO POB 1998R01547 150226.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	20,698	0	59,088	0	79,786	
	2024	20,397	0	69,290	0	89,687	

Land Fair Cash Val: 61,191 Building Fair Cash Val: 207,870 **Non-Farm Value: 269,061**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1978	\$12,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-23-100-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-100-002-00 718 E 1500 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CONRATH KEITH A

Address to send notice if different than shown at left:

718 E 1500 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$75,571** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-100-002-00	Class 0011	Acreage 7.200	Print Date 9/23/2024	2023 Taxes: \$ 4,463.08		ESTIMATED	2024 Taxes: \$ 4,485.57
Legal Description E596.71' W1244' N365' NW COR NW1/4 NW1/4 & BEG NW COR NW1/4 E1244' S.365' TO POB S307.73' W312.38' N307.68' E312.61' TO POB 1999R04091 1983R47944	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	7,417	1,198	57,107	9,500	75,222	
	2024	7,307	1,341	57,423	9,500	75,571	

15-12-23-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Exemption History **Amount**
Tax Year

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
08/01/1983	\$53,850		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-100-003-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BROWN TIMOTHY J & PATRICIA L

Address to send notice if different than shown at left:

710 E 1500 NORTH RD
TAYLORVILLE IL 62568

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$2,337 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-23-100-003-00

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Exemption History Amount Tax Year

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Includes sales from 2007 and 2011)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-100-003-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN CAROLYN R TTEE

Address to send notice if different than shown at left:

1496 N 175 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$48,423** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-100-003-01	Class 0021	Acreage 71.170	Print Date 9/23/2024	2023 Taxes: \$ 2,916.00		ESTIMATED		2024 Taxes: \$ 3,122.06
Legal Description BEG NE COR NW1/4 S1975.19' W1336.89' N655.15' W665.54' N655.35' E595.69' N672.96' E1316.21' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	45,227	0	0	45,227		
	2024	0	48,423	0	0	48,423		

15-12-23-100-003-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/03/2007	\$284,688	2007R05851	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-100-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION FARMS INC

Address to send notice if different than shown at left:

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,935** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-23-100-004-00	Class 0021	Acreage 26.740	Print Date 9/23/2024	2023 Taxes: \$ 509.30		ESTIMATED	2024 Taxes: \$ 576.08
Legal Description SW1/4 OF NW1/4 EX 1/5 AC SE COR & EX SW1/4 NW1/4 BEG SW COR N721.48' TO POB THENCE N610.42' E559.36' SELY292.82' SWLY162.48' SWLY526.12' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	7,899	0	0	7,899	
	2024	0	8,935	0	0	8,935	

15-12-23-100-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
05/17/2021	\$35,992	2021R02017	No
07/29/2022	\$35,882	2022R02805	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-100-004-01 1470 N 700 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FRANKLIN PAUL & KELLY

Address to send notice if different than shown at left:

1470 N 700 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$44,004** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-100-004-01	Class 0010	Acreage 6.540	Print Date 9/23/2024	2023 Taxes: \$ 2,337.72		ESTIMATED 2024 Taxes: \$ 2,370.80	
Legal Description SW1/4 NW1/4 BEG SW COR N721.48' TO POB THENCE N610.42' E559.36' SELY292.82' SWLY162.48' SWLY526.12' TO POB 1998R04609 150229.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	16,367	0	25,891	0	42,258	
	2024	16,557	0	27,447	0	44,004	

Land Fair Cash Val: 49,671 Building Fair Cash Val: 82,341 **Non-Farm Value: 132,012**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD IMPROVEMENT	6000 1233

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/17/2021	\$35,992	2021R02017	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-23-100-004-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-100-004-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SADOWSKI CURTIS D JR

Address to send notice if different than shown at left:

694 E 1350 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,950** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-100-004-02	Class 0021	Acreage 6.520	Print Date 9/23/2024	2023 Taxes: \$ 112.20		ESTIMATED		2024 Taxes: \$ 125.73
Legal Description SW1/4 NW1/4 COM SW COR THENCE N231.86' TO POB THENCE N489.62' E526.12' SELY351.17' SELY166.19' SWLY616.77' TO POB 1998R04609 150229.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	1,740	0	0	1,740		
	2024	0	1,950	0	0	1,950		

15-12-23-100-004-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
07/29/2022	\$35,882	2022R02805	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-100-005-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH FARMS

131 CEDAR ST
PO BOX 554
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,596** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-23-100-005-00	Class 0021	Acreage 20.200	Print Date 9/23/2024	2023 Taxes: \$ 818.38		ESTIMATED	2024 Taxes: \$ 876.60
Legal Description S1/2 SE1/4 NW1/4 & 1/5AC SE COR SW1/4 NW1/4 1993R01203 150228.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	12,693	0	0	12,693	
	2024	0	13,596	0	0	13,596	

15-12-23-100-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH FARMS

131 CEDAR ST
PO BOX 554
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$54,117** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-23-200-001-00	Class 0021	Acreage 73.500	Print Date 9/23/2024	2023 Taxes: \$ 3,273.26		ESTIMATED	2024 Taxes: \$ 3,489.18
Legal Description N73.5AC W1/2 NE1/4 150223.000 93-01203	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	50,768	0	0	50,768	
	2024	0	54,117	0	0	54,117	

15-12-23-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-200-002-00 795 E 1500 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SINKHORN JAMES S & LISA

Address to send notice if different than shown at left:

795 E 1500 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$67,106** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-200-002-00	Class 0010	Acreage 5.000	Print Date 9/23/2024	2023 Taxes: \$ 2,956.36	ESTIMATED			2024 Taxes: \$ 3,712.39
Legal Description THAT PART NE1/4 NE1/4 LY N OF PUBLIC HIGHWAY 150224.000 86-16067	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	12,848	0	39,005	0	51,853		
	2024	15,473	0	51,633	0	67,106		

Land Fair Cash Val: 46,419 Building Fair Cash Val: 154,899 **Non-Farm Value: 201,318**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
Tax Year 2024 IMPROVEMENT	3527

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/03/2007	\$82,000	2007R05839	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-23-200-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-200-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRIPLE H INC

Address to send notice if different than shown at left:

1454 N 775 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,422** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-200-003-00	Class 0020	Acreage 75.000	Print Date 9/23/2024	2023 Taxes: \$ 349.58		ESTIMATED	2024 Taxes: \$ 349.58
Legal Description PRT NE NE LY S OF PUB RD & SE NE EX S30 150222.000 93-05630	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,422	0	0	0	5,422	
	2024	5,422	0	0	0	5,422	

Land Fair Cash Val: 16,266 Building Fair Cash Val: 0 **Non-Farm Value: 16,266**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-23-200-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-200-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION FARMS INC

Address to send notice if different than shown at left:

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,067** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-200-004-00	Class 0021	Acreage 6.500	Print Date 9/23/2024	2023 Taxes: \$ 244.36		ESTIMATED 2024 Taxes: \$ 262.22	
Legal Description S END W1/2 NE1/4 150225.000 98-04609	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	3,790	0	0	3,790	
	2024	0	4,067	0	0	4,067	

15-12-23-200-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-200-005-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FOSTER RUSSEL & KERI

Address to send notice if different than shown at left:

516 S ANDERSON ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$543** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-200-005-00	Class 0020	Acreage 1.000	Print Date 9/23/2024	2023 Taxes: \$ 35.46		ESTIMATED 2024 Taxes: \$ 35.01	
Legal Description COM SW COR SE1/4 NE1/4 TH E1419' N30' W1419' S30' TO POB 150221.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	550	0	0	0	550	
	2024	543	0	0	0	543	

Land Fair Cash Val: 1,629 Building Fair Cash Val: 0 **Non-Farm Value: 1,629**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/09/2012	\$52,250	2012R06192	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-23-200-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION FARMS INC

Address to send notice if different than shown at left:

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,284** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-300-001-00	Class 0021	Acreage 68.870	Print Date 9/23/2024	2023 Taxes: \$ 1,774.74		ESTIMATED	2024 Taxes: \$ 1,952.55
Legal Description W1/2 SW1/4 EX 5.00AC NE COR & EX 6.13AC SE COR 150231.000 98-04609	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	27,526	0	0	27,526	
	2024	0	30,284	0	0	30,284	

15-12-23-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-300-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION FARMS INC

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$949** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-300-002-00	Class 0021	Acreage 5.000	Print Date 9/23/2024	2023 Taxes: \$ 53.58		ESTIMATED		2024 Taxes: \$ 61.19
Legal Description 5.00AC IN NE COR NW1/4 SW1/4 150230.000 93-01203		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	831	0	0	831	
		2024	0	949	0	0	949	

15-12-23-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
02/02/2023	\$35,000	2023R00308	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-300-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION FARMS INC

Address to send notice if different than shown at left:

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,626** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-300-003-00	Class 0021	Acreage 14.000	Print Date 9/23/2024	2023 Taxes: \$ 643.84		ESTIMATED 2024 Taxes: \$ 685.11	
Legal Description N14.00AC NE1/4 SW1/4 150232.000 98-04609	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	9,986	0	0	9,986	
	2024	0	10,626	0	0	10,626	

15-12-23-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-300-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION FARMS INC

Address to send notice if different than shown at left:

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,398** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-300-004-00	Class 0021	Acreage 14.000	Print Date 9/23/2024	2023 Taxes: \$ 567.70		ESTIMATED	2024 Taxes: \$ 605.93
Legal Description PART NE1/4 SW1/4 150233.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	8,805	0	0	8,805	
	2024	0	9,398	0	0	9,398	

15-12-23-300-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-300-005-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION FARMS INC

Address to send notice if different than shown at left:

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,993** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-300-005-00	Class 0021	Acreage 36.000	Print Date 9/23/2024	2023 Taxes: \$ 1,314.12		ESTIMATED		2024 Taxes: \$ 1,417.99
Legal Description S3/10 NE1/4 SW1/4 & N3/8 SE1/4 SW1/4 150234.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	20,382	0	0	20,382		
	2024	0	21,993	0	0	21,993		

15-12-23-300-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-300-006-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION FARMS INC

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,748** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-300-006-00	Class 0021	Acreage 22.000	Print Date 9/23/2024	2023 Taxes: \$ 101.94		ESTIMATED	2024 Taxes: \$ 112.70
Legal Description E1830.18 S523.59 SW1/4 150235.000 94-00313	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	1,581	0	0	1,581	
	2024	0	1,748	0	0	1,748	

15-12-23-300-006-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION FARMS INC

Address to send notice if different than shown at left:

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,260** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-400-001-00	Class 0021	Acreage 25.000	Print Date 9/23/2024	2023 Taxes: \$ 862.86		ESTIMATED	2024 Taxes: \$ 919.41
Legal Description N28.00AC NW1/4 SE1/4 EX 3.00AC SE COR 150236.000 98-04609	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	13,383	0	0	13,383	
	2024	0	14,260	0	0	14,260	

15-12-23-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-400-002-00 1437 N 775 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LEDERBRAND BRIAN

620 W PAULINE ST
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,753** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-400-002-00	Class 0010	Acreage 3.000	Print Date 9/23/2024	2023 Taxes: \$ 1,475.32	ESTIMATED			2024 Taxes: \$ 1,918.32
Legal Description BEG 440 S NE COR NW1/4 SE1/4 S525 W300 N352 NELY 350 150236.001 80-34325 80-33918	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	11,420	0	17,462	0	28,882		
	2024	11,253	0	24,500	0	35,753		

Land Fair Cash Val: 33,759 Building Fair Cash Val: 73,500 **Non-Farm Value: 107,259**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-23-400-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-400-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION FARMS INC

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$60,570** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-400-003-00	Class 0021	Acreage 92.000	Print Date 9/23/2024	2023 Taxes: \$ 3,653.46		ESTIMATED		2024 Taxes: \$ 3,905.23
Legal Description S52.00AC W1/2 SE1/4 & SE1/4 SE1/4 150238.000 98-04609	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	56,665	0	0	56,665		
	2024	0	60,570	0	0	60,570		

15-12-23-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-401-001-00 1452 N 775 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRIS LONNIE

Address to send notice if different than shown at left:

1452 N 775 EAST RD
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,307** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-401-001-00	Class 0010	Acreage 2.200	Print Date 9/23/2024	2023 Taxes: \$ 624.12	ESTIMATED			2024 Taxes: \$ 648.10
Legal Description BG 30S NW CR NE SE TH E265 S3600 W265 N360 150242.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,705	0	22,018	0	31,723		
	2024	9,567	0	22,740	0	32,307		

Land Fair Cash Val: 28,701 Building Fair Cash Val: 68,220 **Non-Farm Value: 96,921**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	10671
	IMPROVEMENT	372
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	11255

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-23-401-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-401-001-01 1426A N 775 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRIS MARK L & SHARON D

Address to send notice if different than shown at left:

1426A N 775 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$115,813** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-401-001-01	Class 0010	Acreage 5.770	Print Date 9/23/2024	2023 Taxes: \$ 7,205.50		ESTIMATED		2024 Taxes: \$ 7,080.16
Legal Description BG 30S NW CR NE SE TH E265' S291.02' TO POB E1056.80' S1001.06' W190.6' N932.06' W866.80' N70'	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	16,252	0	101,505	0	117,757		
	2024	20,940	0	94,873	0	115,813		

Land Fair Cash Val: 62,820 Building Fair Cash Val: 284,619 **Non-Farm Value: 347,439**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/03/2013	\$25,000	2013R03981	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-23-401-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-401-002-00 1454 N 775 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRIS LEROY

Address to send notice if different than shown at left:

1454 N 775 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$59,863** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-401-002-00	Class 0010	Acreage 8.000	Print Date 9/23/2024	2023 Taxes: \$ 1,921.36		ESTIMATED	2024 Taxes: \$ 1,921.35	
Legal Description BEG NW COR NE1/4 SE1/4 TH E TO NE COR NE1/4 SE1/4 TH S320' W1055' N290' W265' N30' TO POB MHRE 150241.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	17,842	0	36,375	0	54,217		
	2024	17,583	0	42,280	0	59,863		

Land Fair Cash Val: 52,749 Building Fair Cash Val: 126,840 **Non-Farm Value: 179,589**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	13417
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	SEN FREEZE	19063

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-23-401-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-401-003-00 1446 N 775 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRIS STANLEY

Address to send notice if different than shown at left:

1446 N 775 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$77,046** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-401-003-00	Class 0010	Acreage 8.000	Print Date 9/23/2024	2023 Taxes: \$ 3,623.54	ESTIMATED			2024 Taxes: \$ 4,258.30
Legal Description BG 930N SW CR NE SE TH E1125 S310 W1125 N310 150240.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	17,842	0	49,359	0	67,201		
	2024	17,583	0	59,463	0	77,046		

Land Fair Cash Val: 52,749 Building Fair Cash Val: 178,389 **Non-Farm Value: 231,138**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-23-401-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-401-004-00 1436 N 775 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

OWENBY DORIS (LSE)
% MARK & SHARON HARRIS (LSR)

1426A N 775 EAST RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,153** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-401-004-00	Class 0010	Acreage 8.000	Print Date 9/23/2024	2023 Taxes: \$ 1,053.08	ESTIMATED			2024 Taxes: \$ 1,053.07
Legal Description BG 620N SW CR NE SE TH E1125 S310 W1125 N310 TO BG 150237.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	17,842	0	13,290	0	31,132		
	2024	17,583	0	14,570	0	32,153		

Land Fair Cash Val: 52,749 Building Fair Cash Val: 43,710 **Non-Farm Value: 96,459**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	Leasehold Owner	6000
	ELDERLY	5000
	SEN FREEZE	3799
2024	Leasehold Owner	6000
	ELDERLY	5000
	SEN FREEZE	4820

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-23-401-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-401-005-00 1430 N 775 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HARRIS CHAD E

Address to send notice if different than shown at left:

1430 N 775 EAST RD
TAYLORVILLE IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$52,993 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change: IMPROVEMENT ADDED, MAY QUALIFY FOR AN IMPROVEMENT EXEMPTION. CHECK WITH BOARD OF REVIEW.

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 40,089 Building Fair Cash Val: 118,890 Non-Farm Value: 158,979

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Exemption History, Amount, Tax Year 2023, Tax Year 2024.

Table with columns: Sales History, Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-23-401-005-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-401-006-00 1428 N 775 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRIS CHARLES F & JENNIFER

Address to send notice if different than shown at left:

1428 N 775 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$62,934** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-401-006-00	Class 0010	Acreage 2.020	Print Date 9/23/2024	2023 Taxes: \$ 3,732.70	ESTIMATED			2024 Taxes: \$ 3,670.80
Legal Description FRANKLIN PARK SUB FINAL PLAT LOT 1 150237.002 2001-07563 310X283.85 2004R07350 QCD	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,319	0	54,575	0	63,894		
	2024	9,187	0	53,747	0	62,934		

Land Fair Cash Val: 27,561 Building Fair Cash Val: 161,241 **Non-Farm Value: 188,802**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-23-401-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-401-006-01 1426 N 775 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRIS MARK L & SHARON D

Address to send notice if different than shown at left:

1426A N 775 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,187** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-401-006-01	Class 0020	Acreage 2.020	Print Date 9/23/2024	2023 Taxes: \$ 600.84	ESTIMATED			2024 Taxes: \$ 592.33
Legal Description FRANKLIN PARK SUB FINAL PLAT LOT 2 2000-01012 210X283.85	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	9,319	0	0	0	9,319		
	2024	9,187	0	0	0	9,187		

Land Fair Cash Val: 27,561 Building Fair Cash Val: 0 **Non-Farm Value: 27,561**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
09/23/2020	\$15,000	2020R03676	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-23-401-006-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LLA EXPLORATION INC

Address to send notice if different than shown at left:

1747 N 800 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$640** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-700-001-00	Class 7100	Acreage 640.000	Print Date 9/23/2024	2023 Taxes: \$ 41.26		ESTIMATED	2024 Taxes: \$ 41.26
Legal Description COAL & MINERAL RIGHTS UNDERLYING ALL TOTAL 640A MINED OUT 157722.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	640	0	640	
	2024	0	0	640	0	640	

15-12-23-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-750-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATIONS KENNETH F FARMS INC

Address to send notice if different than shown at left:

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$667** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-750-001-00	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 43.00		ESTIMATED	2024 Taxes: \$ 43.00
Legal Description OIL LSE WK INT NATION #1P LSE#5670 OWNER#140087 158377.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	667	0	667	
	2024	0	0	667	0	667	

15-12-23-750-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-750-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PETRA OIL LTD

ARCADE CT 2

LINCOLN

IL 62656

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-23-750-002-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE WRK INT SMITH #1 LSE	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0		
	2024	0	0	0	0	0		

15-12-23-750-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-750-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PETRA OIL LTD

ARCADE CT 2

LINCOLN

IL 62656

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-23-750-003-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE WRK INT SMITH #2 LSE	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-23-750-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-750-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PETRA OIL LTD

ARCADE CT 2

LINCOLN

IL 62656

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-23-750-004-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE WRK INT NATION #3 LSE	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-23-750-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-750-005-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

M&N OIL CO

Address to send notice if different than shown at left:

PO BOX 197
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-23-750-005-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE WORKING INT NATION PEABODY LSE NO 2 158378.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-23-750-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-23-750-006-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CNX RESOURCES
 %PROPERTY TAX DEPT
 STE 400
 1000 HORIZON VUE DR
 CANONSBURG PA 15317

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$904** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-23-750-006-00	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 58.30		ESTIMATED	2024 Taxes: \$ 58.29
Legal Description OIL LSE ROYALTY INT NATION #1P LSE#5670 OWNER#19460 158377.002	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	904	0	904	
	2024	0	0	904	0	904	

15-12-23-750-006-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
 Signed: _____ Date ___ / ___ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-24-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WASTE MGMT OF ILLINOIS INC

Address to send notice if different than shown at left:

PO BOX 1450
CHICAGO

IL 60690

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,218** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-24-100-001-00	Class 0011	Acreage 105.400	Print Date 9/23/2024	2023 Taxes: \$ 3,110.22		ESTIMATED	2024 Taxes: \$ 3,338.25
Legal Description ALL THAT PART OF NW1/4 LY E OF SANAGMON RIVER EX FOR 14-345 ACRES 1993R05630 150243.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	7,620	41,031	0	0	48,651	
	2024	7,620	44,598	0	0	52,218	

15-12-24-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-24-100-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WASTE MGMT OF ILLINOIS INC

Address to send notice if different than shown at left:

PO BOX 1450
CHICAGO

IL 60690

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$81,213** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-24-100-001-01	Class 0063	Acreage 14.345	Print Date 9/23/2024	2023 Taxes: \$ 5,191.88		ESTIMATED	2024 Taxes: \$ 5,191.88
Legal Description SE1/4 PART OF NW1/4 150243.003 90-03046	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	81,213	0	0	0	81,213	
	2024	81,213	0	0	0	81,213	

Land Fair Cash Val: 243,639 Building Fair Cash Val: 0 **Non-Farm Value: 243,639**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-24-100-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-24-100-001-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TRIPLE H INC

Address to send notice if different than shown at left:

1454 N 775 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,941** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-24-100-001-02	Class 0020	Acreage 40.670	Print Date 9/23/2024	2023 Taxes: \$ 188.02		ESTIMATED	2024 Taxes: \$ 188.02
Legal Description ALL THAT PART NW1/4 LY W OF SANGAMON RIVER EX S30' W90.24'	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,941	0	0	0	2,941	
	2024	2,941	0	0	0	2,941	

Land Fair Cash Val: 8,823 Building Fair Cash Val: 0 **Non-Farm Value: 8,823**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-24-100-001-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-24-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HARRIS MARK L & SHARON D

Address to send notice if different than shown at left:

1426A N 775 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,663** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-24-300-001-00	Class 0020	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,405.30		ESTIMATED		2024 Taxes: \$ 1,384.90
Legal Description NW1/4 SW1/4 1984R02871 150243.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	21,982	0	0	0	21,982		
	2024	21,663	0	0	0	21,663		

Land Fair Cash Val: 64,989 Building Fair Cash Val: 0 **Non-Farm Value: 64,989**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u>	

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/09/2012	\$52,250	2012R06192	No
11/15/2013	\$60,000	2013R05120	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-24-300-001-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-24-300-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WASTE MGMT OF ILLINOIS INC

Address to send notice if different than shown at left:

PO BOX 1450
CHICAGO

IL 60690

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$20,603** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-24-300-002-00	Class 0011	Acreage 64.980	Print Date 9/23/2024	2023 Taxes: \$ 1,258.78		ESTIMATED	2024 Taxes: \$ 1,317.13
Legal Description E1/2 SW1/4 EX NE1/4 15.023AC 150243.002 93-05630	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	9,352	10,338	0	0	19,690	
	2024	9,352	11,251	0	0	20,603	

15-12-24-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-24-300-002-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WASTE MGMT OF ILLINOIS INC

PO BOX 1450
CHICAGO IL 60690

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$85,059** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-24-300-002-01	Class 0063	Acreage 15.023	Print Date 9/23/2024	2023 Taxes: \$ 5,437.76		ESTIMATED	2024 Taxes: \$ 5,437.75
Legal Description PART NE1/4 SW1/4 15.023AC 150243.004 90-03046	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	85,059	0	0	0	85,059	
	2024	85,059	0	0	0	85,059	

Land Fair Cash Val: 255,177 Building Fair Cash Val: 0 **Non-Farm Value: 255,177**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-24-300-002-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-24-300-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION JUANITA M

Address to send notice if different than shown at left:

522 BLACK HILLS DR
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,317** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-24-300-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 191.98		ESTIMATED 2024 Taxes: \$ 212.05	
Legal Description SW1/4 SW1/4 150244.000 2003R09073 2001-04184	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	3,003	0	0	3,003	
	2024	0	3,317	0	0	3,317	

15-12-24-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-24-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-24-700-001-00	Class 7100	Acreage 280.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING S1/2 SW & NW & NE SW 280A MINED OUT 157723.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-12-24-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION JUANITA M

Address to send notice if different than shown at left:

522 BLACK HILLS DR
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,886** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-25-100-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 925.32		ESTIMATED 2024 Taxes: \$ 1,015.58	
Legal Description NW1/4 NW1/4 150251.000 2003R09073 2001-04184	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	14,474	0	0	14,474	
	2024	0	15,886	0	0	15,886	

15-12-25-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-100-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WASTE MGMT OF ILLINOIS INC

Address to send notice if different than shown at left:

PO BOX 1450
CHICAGO

IL 60690

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,851** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-25-100-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 1,920.82		ESTIMATED	2024 Taxes: \$ 2,100.14
Legal Description E1/2 NW1/4 150250.000 93-05630	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	30,046	0	0	30,046	
	2024	0	32,851	0	0	32,851	

15-12-25-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-100-003-00 819 E 1350 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION BRUCE W

Address to send notice if different than shown at left:

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$53,340** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-25-100-003-00	Class 0011	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 2,950.72		ESTIMATED		2024 Taxes: \$ 3,409.98
Legal Description SW1/4 NW1/4 150252.000 2004R03570	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	3,355	4,226	30,575	8,000	46,156		
	2024	3,307	4,773	37,260	8,000	53,340		

15-12-25-100-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/01/2004	\$117,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WASTE MGMT OF ILLINOIS INC

Address to send notice if different than shown at left:

PO BOX 1450
CHICAGO

IL 60690

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,181** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-25-200-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 1,734.72		ESTIMATED	2024 Taxes: \$ 1,865.52
Legal Description W1/2 NE1/4 150247.000 93-05630	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	27,135	0	0	27,135	
	2024	0	29,181	0	0	29,181	

15-12-25-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-200-002-00 896 E 1400 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JOHNSON ADAM J

Address to send notice if different than shown at left:

896 E 1400 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$71,880** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-25-200-002-00	Class 0010	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 4,590.76		ESTIMATED 2024 Taxes: \$ 4,211.66	
Legal Description N1/2 NE1/4 NE1/4 150245.000 77-12788	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	26,409	0	51,401	0	77,810	
	2024	26,023	0	45,857	0	71,880	

Land Fair Cash Val: 78,069 Building Fair Cash Val: 137,571 **Non-Farm Value: 215,640**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/17/2015	\$195,000	2015R01440	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-25-200-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-200-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MORGAN CATHERINE & JAMES K

Address to send notice if different than shown at left:

897 E 1320 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,755** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-25-200-003-00	Class 0021	Acreage 60.000	Print Date 9/23/2024	2023 Taxes: \$ 401.80		ESTIMATED 2024 Taxes: \$ 431.84	
Legal Description S3/4 E1/2 NE1/4 150246.001 88-4134	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	6,285	0	0	6,285	
	2024	0	6,755	0	0	6,755	

15-12-25-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ACHENBACH ALAN T

Address to send notice if different than shown at left:

601 LAKESIDE DR
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,387** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-25-300-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,094.02		ESTIMATED	2024 Taxes: \$ 1,175.47
Legal Description NW1/4 SW1/4 150253.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	17,113	0	0	17,113	
	2024	0	18,387	0	0	18,387	

15-12-25-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-300-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ALDRICH ANDREW E & JO ANN A

Address to send notice if different than shown at left:

509 N 300 EAST RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,369** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-25-300-002-00	Class 0021	Acreage 78.480	Print Date 9/23/2024	2023 Taxes: \$ 1,065.26		ESTIMATED		2024 Taxes: \$ 1,174.32
Legal Description E 1/2 SW 1/4 EX 1.521 AC FOR ROAD WAY 150254.000 94-05520 92-06739	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	16,663	0	0	16,663		
	2024	0	18,369	0	0	18,369		

15-12-25-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/01/1992	\$50,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-300-002-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SULLIVAN KENNETH R

Address to send notice if different than shown at left:

PO BOX 258
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,561** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-25-300-002-01	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,833.82		ESTIMATED		2024 Taxes: \$ 1,953.74
Legal Description SW1/4 SW1/4 150254.001 2001-04128 92-06891	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	28,685	0	0	28,685		
	2024	0	30,561	0	0	30,561		

15-12-25-300-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/1992	\$75,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-400-002-00 1335 N 850 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAGGENER EMILY B

Address to send notice if different than shown at left:

1335 N 850 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$47,661** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change: PROPERTY CHANGED FROM FARM TO NON-FARM CLASSIFICATION

Parcel Number 15-12-25-400-002-00	Class 0011	Acreage 35.450	Print Date 9/23/2024	2023 Taxes: \$ 2,208.44	ESTIMATED			2024 Taxes: \$ 2,603.07
Legal Description NW1/4 SE1/4 EX FOR THAT PORTION FOR RIGHT OF WAY FOR PUBLIC ROAD 1989R08861 150256.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	5,867	3,642	31,979	0	41,488		
	2024	5,980	3,911	37,770	0	47,661		

15-12-25-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 943
2024	OWNER OCCUPD IMPROVEMENT	6000 943

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/18/2011	\$15,000	2011R01725	No
05/15/2012	\$43,000	2012R02652	No
08/02/2022	\$295,000	2022R02843	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-400-003-00 889 E 1320 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

OWEN JOHN THOMAS

Address to send notice if different than shown at left:

889 E 1320 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$101,247** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-25-400-003-00	Class 0010	Acreage 30.000	Print Date 9/23/2024	2023 Taxes: \$ 6,106.40		ESTIMATED 2024 Taxes: \$ 6,089.06	
Legal Description W3/4 NE1/4 SE1/4 77-12033 150248.000 96-04631	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	33,545	0	67,973	0	101,518	
	2024	33,057	0	68,190	0	101,247	

Land Fair Cash Val: 99,171 Building Fair Cash Val: 204,570 **Non-Farm Value: 303,741**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/14/2013	\$42,000	2013R00737	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-25-400-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-400-004-00 897 E 1320 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MORGAN CATHERINE & JAMES K

Address to send notice if different than shown at left:

897 E 1320 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$56,860** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-25-400-004-00	Class 0010	Acreage 7.992	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description E1/4 NE1/4 SE1/4 EX BEG NW COR SE1/4 E2318' S758.51' TO POB E153.52' S572' W152.31' N572' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	17,834	0	38,723	0	56,557	
	2024	17,577	0	39,283	0	56,860	

Land Fair Cash Val: 52,731 Building Fair Cash Val: 117,849 **Non-Farm Value: 170,580**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled 70-100% Ve	45557
2024	OWNER OCCUPD	6000
	ELDERLY	5000
	Disabled 70-100% Ve	45860

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-25-400-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-400-004-01 895 E 1320 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MORGAN JAMES C & SHANNON M

Address to send notice if different than shown at left:

895 E 1320 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$74,500** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-25-400-004-01	Class 0010	Acreage 2.008	Print Date 9/23/2024	2023 Taxes: \$ 4,342.78		ESTIMATED	2024 Taxes: \$ 4,379.15
Legal Description BEG NW COR SE1/4 E2318' S758.51' POB E153.52' S572' W152.31' N572' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	9,278	0	64,653	0	73,931	
	2024	9,143	0	65,357	0	74,500	

Land Fair Cash Val: 27,429 Building Fair Cash Val: 196,071 **Non-Farm Value: 223,500**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-25-400-004-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-400-005-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TONELLE JOHN CALVERT

Address to send notice if different than shown at left:

517 N LAWN AVE
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,659** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-25-400-005-00	Class 0021	Acreage 39.880	Print Date 9/23/2024	2023 Taxes: \$ 278.10		ESTIMATED		2024 Taxes: \$ 297.85
Legal Description SW1/4 SE1/4 EX 0.117AC FOR ROAD 150261.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	4,350	0	0	4,350		
	2024	0	4,659	0	0	4,659		

15-12-25-400-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-400-006-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LEGG EDMUND O

890 E 1320 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,250** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-25-400-006-00	Class 0010	Acreage 10.000	Print Date 9/23/2024	2023 Taxes: \$ 794.58		ESTIMATED		2024 Taxes: \$ 783.13
Legal Description NW1/4 SE1/4 SE1/4 150259.000 97-00851	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	10,562	0	1,867	0	12,429		
	2024	10,410	0	1,840	0	12,250		

Land Fair Cash Val: 31,230 Building Fair Cash Val: 5,520 **Non-Farm Value: 36,750**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/02/2009	\$10,000	2009R03211	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-25-400-006-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-400-006-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LEGG RAYMOND J

Address to send notice if different than shown at left:

1428 N 1600 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,337** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-25-400-006-02	Class 0011	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 139.44		ESTIMATED	2024 Taxes: \$ 149.40
Legal Description W3/4 S1/2 SE1/4 SE1/4 & W1/2 NE1/4 SE1/4 SE1/4 FORESTRY MANAGEMENT PROGRAM 150259.002	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	2,081	0	100	2,181	
	2024	0	2,237	0	100	2,337	

15-12-25-400-006-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-400-007-00 890 E 1320 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LEGG EDMUND O

Address to send notice if different than shown at left:

890 E 1320 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,710** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-25-400-007-00	Class 0011	Acreage 10.000	Print Date 9/23/2024	2023 Taxes: \$ 1,499.02		ESTIMATED		2024 Taxes: \$ 1,515.76
Legal Description E1/4 SE1/4 SE1/4 2000R06559 1997R01298 1997R00418 1991R02885 1989R09616 150257.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	8,893	791	19,764	0	29,448		
	2024	8,763	854	20,093	0	29,710		

15-12-25-400-007-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-25-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-25-700-001-00	Class 7100	Acreage 640.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLY ALL SEC 640AC MINED OUT 157724.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-12-25-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-26-100-001-00 E 1400 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DYLAN A

Address to send notice if different than shown at left:

718 E 1400 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,126** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-26-100-001-00	Class 0021	Acreage 58.760	Print Date 9/23/2024	2023 Taxes: \$ 2,111.04		ESTIMATED	2024 Taxes: \$ 2,264.74
Legal Description W OF THE CENTERLINE OF THE DILLMAN BRANCH NW1/4 EX 1.23AC LY N OF ROAD & EX NW1/4 NW COR E577.00' S74.89' TO A MAG NAIL ON SET CENTERLINE	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	32,742	0	0	32,742	
	2024	0	35,126	0	0	35,126	

15-12-26-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/28/2022	\$850,000	2022R01112	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-26-100-001-01

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

NATION FARMS INC

Address to send notice if different than shown at left:

795 E 1350 NORTH RD
TAYLORVILLE

IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$237 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-26-100-001-01

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Red arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-26-100-001-02 718 E 1400 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DYLAN A

Address to send notice if different than shown at left:

718 E 1400 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$49,980** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-26-100-001-02	Class 0011	Acreage 5.000	Print Date 9/23/2024	2023 Taxes: \$ 2,336.32		ESTIMATED	2024 Taxes: \$ 2,835.60
Legal Description NW1/4 NW COR E577.00' S74.89' TO A MAG NAIL ON SET CENTERLINE TO POB THENCE MEANDERING SAID CENTERLINE OF 1400 NORTH RD NELY570.90'	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	8,144	1,380	32,712	0	42,236	
	2024	8,237	1,496	40,247	0	49,980	

15-12-26-100-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-26-100-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH FARMS

131 CEDAR ST
PO BOX 554
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,985** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-26-100-002-00	Class 0021	Acreage 46.350	Print Date 9/23/2024	2023 Taxes: \$ 1,933.54		ESTIMATED	2024 Taxes: \$ 2,062.22
Legal Description EAST OF THE CENTERLINE OF THE DILLMAN BRANCH N1/2 NW1/4 150263.000 93-01203	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	29,989	0	0	29,989	
	2024	0	31,985	0	0	31,985	

15-12-26-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-26-100-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HUGGINS CHERYL K & SHERYL E TOLLY

Address to send notice if different than shown at left:

613 VIRGINIA AVE
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,946** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-26-100-003-00	Class 0021	Acreage 50.610	Print Date 9/23/2024	2023 Taxes: \$ 2,050.30		ESTIMATED	2024 Taxes: \$ 2,188.66
Legal Description E OF THE CENTERLINE OF THE DILLMAN BRANCH S1/2 NW1/4 150264.000 95-03873	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	31,800	0	0	31,800	
	2024	0	33,946	0	0	33,946	

15-12-26-100-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-26-200-001-00 795 E 1350 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION BRUCE W & JUANITA

Address to send notice if different than shown at left:

522 BLACK HILLS DR
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$226,222** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-26-200-001-00	Class 0011	Acreage 160.000	Print Date 9/23/2024	2023 Taxes: \$ 13,818.28		ESTIMATED 2024 Taxes: \$ 14,198.75	
Legal Description NE 1/4 150262.000 2003R09073 2001-04184	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	9,857	103,199	60,627	50,000	223,683	
	2024	9,713	109,809	56,700	50,000	226,222	

15-12-26-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD IMPROVEMENT	6000 3362
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-26-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION FARMS INC
%BRUCE W NATION

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16,050** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-26-300-001-00	Class 0021	Acreage 27.030	Print Date 9/23/2024	2023 Taxes: \$ 962.48		ESTIMATED		2024 Taxes: \$ 1,034.82
Legal Description S402 N892 W1/2 SW1/4 & W1320 N490 SW1/4 2003R01854 150267.001 98-03389 94-00531 2003R01855	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	14,928	0	0	14,928		
	2024	0	16,050	0	0	16,050		

15-12-26-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-26-300-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RED ROCK FARMS LLC
%BRUCE NATION
795 E 1250 NORTH RD

TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$61,946** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-26-300-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,761.40		ESTIMATED		2024 Taxes: \$ 3,993.95
Legal Description E 1/2 SW 1/4 150266.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	58,339	0	0	58,339		
	2024	0	61,946	0	0	61,946		

15-12-26-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
05/11/2016	\$3,380,000	2016R01701	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-26-300-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION FARMS INC
%BRUCE W NATION

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$43,279** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-26-300-003-00	Class 0021	Acreage 53.420	Print Date 9/23/2024	2023 Taxes: \$ 2,629.54		ESTIMATED	2024 Taxes: \$ 2,790.40
Legal Description W1/2 SW1/4 EX N26.58AC 150267.000 86-12403	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	40,784	0	0	40,784	
	2024	0	43,279	0	0	43,279	

15-12-26-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/05/2003	\$0	2003R01855	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-26-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BAINBRIDGE JEAN

Address to send notice if different than shown at left:

13676 TOWERLINE RD
PEKIN IL 61554

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,191** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-26-400-001-00	Class 0021	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 921.74		ESTIMATED 2024 Taxes: \$ 979.44	
Legal Description W1/2 NW1/4 SE1/4 150268.000 92-03576	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	14,296	0	0	14,296	
	2024	0	15,191	0	0	15,191	

15-12-26-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-26-400-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUESINGER JAMES P

Address to send notice if different than shown at left:

797 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$48,906** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-26-400-002-00	Class 0011	Acreage 60.000	Print Date 9/23/2024	2023 Taxes: \$ 2,975.44		ESTIMATED		2024 Taxes: \$ 3,153.20
Legal Description E3/4 N1/2 SE1/4 2004R03914 150270.000 2004R04126 1986R13642	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	44,649	0	1,500	46,149		
	2024	0	47,406	0	1,500	48,906		

15-12-26-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-26-400-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BAINBRIDGE JEAN

Address to send notice if different than shown at left:

13676 TOWERLINE RD
PEKIN IL 61554

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,014** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-26-400-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,945.08		ESTIMATED	2024 Taxes: \$ 2,064.09
Legal Description SW1/4 SE1/4 150271.000 92-3576	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	30,168	0	0	30,168	
	2024	0	32,014	0	0	32,014	

15-12-26-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-26-400-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUESINGER JAMES P

Address to send notice if different than shown at left:

797 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$32,964** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-26-400-004-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 2,004.52		ESTIMATED	2024 Taxes: \$ 2,125.34
Legal Description SE1/4 SE1/4 150272.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	31,090	0	0	31,090	
	2024	0	32,964	0	0	32,964	

15-12-26-400-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-26-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EGGIMANN DYLAN

718 E 1400 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,368** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-26-700-001-00	Class 7100	Acreage 640.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 475.05
Legal Description COAL & MINERAL RIGHTS UNDERLY ALL SEC 640A 313.79 LEFT MINE 157725.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	7,368	0	7,368	

15-12-26-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-27-100-001-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BURTON DEBRA JEAN

Address to send notice if different than shown at left:

3913 LEAR DR
SPRINGFIELD

IL 62711

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$116,922 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-27-100-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Four vertical lines for inputting assessed valuations.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-27-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ALLEN SUE E & LAWREN TUCKER

APT 3
1315 W PARK AVE
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$119,952** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-27-200-001-00	Class 0021	Acreage 160.000	Print Date 9/23/2024	2023 Taxes: \$ 7,260.82		ESTIMATED	2024 Taxes: \$ 7,733.87
Legal Description NE 1/4 150273.000 2004R03433 & 34	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	112,615	0	0	112,615	
	2024	0	119,952	0	0	119,952	

15-12-27-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-27-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION FARMS INC

Address to send notice if different than shown at left:

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,053** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-27-300-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,498.02		ESTIMATED	2024 Taxes: \$ 1,615.28
Legal Description NW1/4 SW1/4 150276.000 86-13216	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	23,234	0	0	23,234	
	2024	0	25,053	0	0	25,053	

15-12-27-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-27-300-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUESINGER JOHN T

Address to send notice if different than shown at left:

735 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$61,096** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-27-300-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,704.92		ESTIMATED	2024 Taxes: \$ 3,939.15
Legal Description E1/2 SW1/4 150277.000 86-13644	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	57,463	0	0	57,463	
	2024	0	61,096	0	0	61,096	

15-12-27-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-27-300-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BECKMIER CRAIG

Address to send notice if different than shown at left:

694 E 1100 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,926** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-27-300-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,745.98		ESTIMATED		2024 Taxes: \$ 1,865.00
Legal Description SW1/4 SW1/4 150275.000 88-318	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	27,080	0	0	27,080		
	2024	0	28,926	0	0	28,926		

15-12-27-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-27-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BECKMIER TUCKER

Address to send notice if different than shown at left:

721 E 1100 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$69,890** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-27-400-001-00	Class 0021	Acreage 92.810	Print Date 9/23/2024	2023 Taxes: \$ 4,236.32		ESTIMATED	2024 Taxes: \$ 4,506.14
Legal Description SE1/4 EX 7.34AC TR & EX 35.66 ACRE TR & EX 25.792AC 150280.000 2001-07121 93-7773	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	65,705	0	0	65,705	
	2024	0	69,890	0	0	69,890	

15-12-27-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/1993	\$240,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-27-400-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION FARMS INC
%BRUCE NATION

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$19,426** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-27-400-001-01	Class 0021	Acreage 25.790	Print Date 9/23/2024	2023 Taxes: \$ 1,177.44		ESTIMATED	2024 Taxes: \$ 1,252.49
Legal Description BEG SE COR SE1/4 W824.65 N1514.50 SWLY1403.94 SWLY 618.36 E1341.23 150280.001 92-01896 2003R01855	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	18,262	0	0	18,262	
	2024	0	19,426	0	0	19,426	

15-12-27-400-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
05/01/1992	\$38,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-27-400-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RED ROCK FARMS LLC

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$9,806** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-27-400-002-00	Class 0011	Acreage 5.040	Print Date 9/23/2024	2023 Taxes: \$ 617.02		ESTIMATED 2024 Taxes: \$ 632.24	
Legal Description BEG NE COR SE1/4 S675 W475 N430.60 E244.8 N55 E190 N189 E40 TO BEG 150279.001 94-00531	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	3,770	0	5,800	9,570	
	2024	0	4,006	0	5,800	9,806	

15-12-27-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/11/2018	\$35,000	2018R04070	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-27-400-002-01 694 E 1350 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SADOWSKI CURTIS DANIEL

694 E 1350 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$41,017** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-27-400-002-01	Class 0010	Acreage 2.300	Print Date 9/23/2024	2023 Taxes: \$ 2,654.56		ESTIMATED	2024 Taxes: \$ 2,257.71
Legal Description BEG 40.2'W NE COR SE1/4 W434.8 S244.4 E244.8 N55 E190 N189 TO POB 150279.002 93-04377	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	9,923	0	37,249	0	47,172	
	2024	9,777	0	31,240	0	41,017	

Land Fair Cash Val: 29,331 Building Fair Cash Val: 93,720 **Non-Farm Value: 123,051**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/11/2018	\$115,000	2018R04069	Yes
01/02/2019	\$115,000	2019R00003	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-27-400-002-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-27-400-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION FARMS INC
%BRUCE W NATION

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,667** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-27-400-003-00	Class 0021	Acreage 35.660	Print Date 9/23/2024	2023 Taxes: \$ 1,743.20		ESTIMATED	2024 Taxes: \$ 1,848.30
Legal Description 34.84AC TR SE1/4 & S217 E165 N892 NE1/4 SE1/4 2003R01854 150279.000 98-03389 86-12403 86-13533 2003R01855	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	27,037	0	0	27,037	
	2024	0	28,667	0	0	28,667	

15-12-27-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-27-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NATION BRUCE W

Address to send notice if different than shown at left:

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-27-700-001-00	Class 7100	Acreage 640.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLY ALL SEC 640A 39AC LEFT TO MINE 157726.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-12-27-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-28-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LOVEKAMP BETTY M

Address to send notice if different than shown at left:

1300 N LINCOLN AVE
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,215** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-28-100-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,765.52		ESTIMATED		2024 Taxes: \$ 1,883.63
Legal Description NW1/4 NW1/4 150285.000 2004R06204(QCD) 1997R03722 1976R09404	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	27,383	0	0	27,383		
	2024	0	29,215	0	0	29,215		

15-12-28-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-28-100-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HUGGINS CHERYL K & SHERYL E TOLLY

Address to send notice if different than shown at left:

613 VIRGINIA AVE
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$39,701** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-28-100-002-00	Class 0021	Acreage 55.000	Print Date 9/23/2024	2023 Taxes: \$ 2,401.76		ESTIMATED		2024 Taxes: \$ 2,559.71
Legal Description E 1/2 NW 1/4 EX E 25.00 AC S 35 AC SE 1/4 NW 1/4 150283.000 95-0563 92-06602	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	37,251	0	0	37,251		
	2024	0	39,701	0	0	39,701		

15-12-28-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-28-100-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

STEFFEN CHARLES F

Address to send notice if different than shown at left:

505 E 1350 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,179** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-28-100-003-00	Class 0021	Acreage 34.370	Print Date 9/23/2024	2023 Taxes: \$ 1,521.80		ESTIMATED	2024 Taxes: \$ 1,623.41
Legal Description SW1/4 NW1/4 EX S495 W495 150284.000 87-19275	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	23,603	0	0	23,603	
	2024	0	25,179	0	0	25,179	

15-12-28-100-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-28-100-004-00 505 E 1350 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

STEFFEN CHARLES F & P DIANE

Address to send notice if different than shown at left:

505 E 1350 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$60,249** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-28-100-004-00	Class 0011	Acreage 5.630	Print Date 9/23/2024	2023 Taxes: \$ 3,051.98		ESTIMATED		2024 Taxes: \$ 3,175.31
Legal Description S3/4 W3/4 SW1/4 NW1/4 150284.001 86-13230		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	7,066	2,262	46,008	3,000	58,336	
		2024	6,963	2,453	47,833	3,000	60,249	

15-12-28-100-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD ELDERLY	6000 5000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-28-100-005-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HUGGINS CHERY K & SHERYL E TOLLY

Address to send notice if different than shown at left:

613 VIRGINIA AVE
TAYLORVILLE IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$9,939 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-12-28-100-005-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-28-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GESELL ROY A

Address to send notice if different than shown at left:

1387 N 600 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,739** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-28-200-001-00	Class 0021	Acreage 38.930	Print Date 9/23/2024	2023 Taxes: \$ 739.20		ESTIMATED	2024 Taxes: \$ 821.34
Legal Description E PART FARM TRACT #26 150283.002 98-05280 98-01717 98-01720	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	11,465	0	0	11,465	
	2024	0	12,739	0	0	12,739	

15-12-28-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-28-200-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GESELL ROY A

Address to send notice if different than shown at left:

1387 N 600 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,741** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-28-200-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,673.84		ESTIMATED	2024 Taxes: \$ 1,788.59
Legal Description W1/2 NE1/4 NE1/4 & E1/2 NW1/4 NE1/4 150281.000 91-02860	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	25,961	0	0	25,961	
	2024	0	27,741	0	0	27,741	

15-12-28-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-28-200-003-00 N 600 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

GESELL ROY A

Address to send notice if different than shown at left:

1387 N 600 EAST RD
TAYLORVILLE

IL 62568

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$46,181 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL for years 2023 and 2024.

15-12-28-200-003-00

Required

Complainant's Estimated Correct Assessed Valuations:

Four horizontal lines for valuation input.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 09/27/2016, \$45,000, 2016R03599, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-28-200-003-01 1387 N 600 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GESELL ROY A

Address to send notice if different than shown at left:

1387 N 600 EAST RD
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$92,779** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-28-200-003-01	Class 0011	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 5,147.14	ESTIMATED			2024 Taxes: \$ 5,595.05
Legal Description E20.00AC NE1/4 NE1/4	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	10,278	10,389	58,165	7,000	85,832		
	2024	13,643	10,933	61,203	7,000	92,779		

15-12-28-200-003-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/06/2008	\$12,500	2008R01094	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-28-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC
ATTN JOSEPH A BLOOME PRESIDENT

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100,299** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-28-300-001-00	Class 0021	Acreage 164.210	Print Date 9/23/2024	2023 Taxes: \$ 6,031.68		ESTIMATED	2024 Taxes: \$ 6,466.75
Legal Description SW1/4 150286.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	93,551	0	0	93,551	
	2024	0	100,299	0	0	100,299	

15-12-28-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/2015	\$2,305,195	2015R04652	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-28-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$122,835** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-28-400-001-00	Class 0011	Acreage 164.200	Print Date 9/23/2024	2023 Taxes: \$ 7,635.48		ESTIMATED	2024 Taxes: \$ 7,919.75
Legal Description SE1/4 150286.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	114,426	0	4,000	118,426	
	2024	0	121,835	0	1,000	122,835	

15-12-28-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/01/2015	\$3,166,135	2015R04659	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON FAMILY LAND TRUST #13

Address to send notice if different than shown at left:

2328 TARA LN
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$79,177** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-29-100-001-00	Class 0021	Acreage 120.000	Print Date 9/23/2024	2023 Taxes: \$ 4,751.14		ESTIMATED	2024 Taxes: \$ 5,104.91
Legal Description N1/2 NW1/4 & SW1/4 NW1/4 99-00174 150291.000 89-8133	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	73,690	0	0	73,690	
	2024	0	79,177	0	0	79,177	

15-12-29-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Exemption History **Amount**
Tax Year

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
03/01/1984	\$284,500		Yes
02/02/2017	\$758,500	2017R00425	No
02/02/2017	\$574,440	2017R00427	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-100-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRAEUNINGER DENNIS D & JULIANN

Address to send notice if different than shown at left:

1397 N 470 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,954** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-29-100-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,618.78		ESTIMATED		2024 Taxes: \$ 1,737.85
Legal Description SE1/4 NW1/4 150289.001 2002-06777 88-650 87-19234	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	25,107	0	0	25,107		
	2024	0	26,954	0	0	26,954		

15-12-29-100-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/23/2019	\$266,625	2019R01203	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-200-001-00 1357 N 470 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRAEUNINGER DENNIS D & JULIANN

Address to send notice if different than shown at left:

1397 N 470 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$131,616** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-29-200-001-00	Class 0011	Acreage 78.500	Print Date 9/23/2024	2023 Taxes: \$ 7,811.70		ESTIMATED	2024 Taxes: \$ 8,485.90
Legal Description W1/2 NE1/4 EX N256 E256 150289.000 2002-06777 88-650 87-19234	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	8,315	50,407	25,937	36,500	121,159	
	2024	8,193	53,833	33,090	36,500	131,616	

15-12-29-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
04/23/2019	\$266,625	2019R01203	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-200-001-01 1397 N 470 EAST RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRAEUNINGER DENNIS D & JULIANN CO TTE

Address to send notice if different than shown at left:

1397 N 470 EAST RD
PAWNEE

IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$82,307** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-29-200-001-01	Class 0010	Acreage 1.504	Print Date 9/23/2024	2023 Taxes: \$ 4,381.90	ESTIMATED			2024 Taxes: \$ 4,597.50
Legal Description N256 E256 N1/2 NW1/4 NE1/4 150289.002 89-8823	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	8,208	0	70,755	0	78,963		
	2024	8,090	0	74,217	0	82,307		

Land Fair Cash Val: 24,270 Building Fair Cash Val: 222,651 **Non-Farm Value: 246,921**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-29-200-001-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-200-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LOVEKAMP BETTY M

Address to send notice if different than shown at left:

1300 N LINCOLN AVE
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,842** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-29-200-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,807.62		ESTIMATED	2024 Taxes: \$ 1,924.05
Legal Description NE1/4 NE1/4 150288.000 2004R06206(QCD) 1985R06362	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	28,036	0	0	28,036	
	2024	0	29,842	0	0	29,842	

15-12-29-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-200-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

STEFFEN CHARLES F

Address to send notice if different than shown at left:

505 E 1350 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,589** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-29-200-003-00	Class 0021	Acreage 38.120	Print Date 9/23/2024	2023 Taxes: \$ 1,732.64		ESTIMATED	2024 Taxes: \$ 1,843.27
Legal Description SE1/4 NE1/4 EX E165' S495' 1987R19275 1986R13230 150287.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	26,873	0	0	26,873	
	2024	0	28,589	0	0	28,589	

15-12-29-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-200-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

STEFFEN CHARLES F & P DIANE

Address to send notice if different than shown at left:

505 E 1350 NORTH RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,867** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-29-200-004-00	Class 0011	Acreage 1.880	Print Date 9/23/2024	2023 Taxes: \$ 568.22	ESTIMATED			2024 Taxes: \$ 571.70
Legal Description E1/4 S3/4 SE1/4 SE1/4 NE1/4 1986R13230 150287.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	813	0	8,000	8,813		
	2024	0	867	0	8,000	8,867		

15-12-29-200-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BKM REALTY LLC

Address to send notice if different than shown at left:

1007 N MAIN ST
COLUMBIA IL 62236

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$42,842** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-29-300-001-00	Class 0021	Acreage 67.800	Print Date 9/23/2024	2023 Taxes: \$ 2,559.46		ESTIMATED	2024 Taxes: \$ 2,762.23
Legal Description BEG 166.30' W OF NW CORNER N3/4 SW1/4 THENCE W1489.35' S1983.73' E1489.35' N TO THE BEG 150295.001 97-05683 91-01618	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	39,697	0	0	39,697	
	2024	0	42,842	0	0	42,842	

15-12-29-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
02/28/2019	\$1,361,713	2019R00602	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-300-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRAEUNINGER DENNIS D & JULIANN CO TRU

Address to send notice if different than shown at left:

1397 N 470 EAST RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,470** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-29-300-001-01	Class 0021	Acreage 45.170	Print Date 9/23/2024	2023 Taxes: \$ 1,639.34		ESTIMATED	2024 Taxes: \$ 1,771.12
Legal Description W1/2 W3/4 N3/4 SW1/4 150295.003 92-00570	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	25,426	0	0	25,426	
	2024	0	27,470	0	0	27,470	

15-12-29-300-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
03/01/1992	\$103,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-300-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,450** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-29-300-002-00	Class 0021	Acreage 16.060	Print Date 9/23/2024	2023 Taxes: \$ 755.32		ESTIMATED 2024 Taxes: \$ 802.71	
Legal Description W1094 S1/2 S1/2 SW1/4 150298.001 79-29829	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	11,715	0	0	11,715	
	2024	0	12,450	0	0	12,450	

15-12-29-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/2005	\$909,600	2005R06744	No
10/04/2013	\$625,000	2013R04512	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-300-003-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BLOOME FARMS INC
%JOSEPH A BLOOME PRES

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$9,598 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-29-300-003-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-300-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURVEY ROBERT O CO TR
 C/O U S BANK FARM MANAGEMENT
 3RD FL
 205 S 5TH ST
 SPRINGFIELD IL 62701

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$4,729** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-29-300-004-00	Class 0021	Acreage 7.580	Print Date 9/23/2024	2023 Taxes: \$ 282.02		ESTIMATED	2024 Taxes: \$ 304.90
Legal Description E7.58AC S1/2 SE1/4 SW1/4 2000-00944 150297.001 99-02081 99-02081 90-05676	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	4,374	0	0	4,374	
	2024	0	4,729	0	0	4,729	

15-12-29-300-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-300-005-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BKM REALTY LLC

Address to send notice if different than shown at left:

1007 N MAIN ST
COLUMBIA IL 62236

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$5,383 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-29-300-005-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 02/28/2019, \$1,361,713, 2019R00602, No)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BKM REALTY LLC

Address to send notice if different than shown at left:

1007 N MAIN ST
COLUMBIA IL 62236

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$40,083** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-29-400-001-00	Class 0021	Acreage 57.550	Print Date 9/23/2024	2023 Taxes: \$ 2,418.32		ESTIMATED	2024 Taxes: \$ 2,584.34
Legal Description N3/4 W1/2 SE1/4 EX W1/2 SE1/4 BEG NW1/4 COR E457.86' TO POB THENCE E361.50' S361.50' W361.50' N361.50' TO POB 150295.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	37,508	0	0	37,508	
	2024	0	40,083	0	0	40,083	

15-12-29-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
02/28/2019	\$1,361,713	2019R00602	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-400-001-01 458 E 1350 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

REINHOLD GARY M & LEANNE TTEES

Address to send notice if different than shown at left:

18501 E PARADA CIR
RIO VERDE AZ 85263

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$41,521** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-29-400-001-01	Class 0011	Acreage 3.000	Print Date 9/23/2024	2023 Taxes: \$ 2,554.04	ESTIMATED			2024 Taxes: \$ 2,677.05
Legal Description N3/4 W1/2 SE1/4 EX W1/2 SE1/4 BEG NW1/4 COR E457.86' TO POB THENCE E361.50' S361.50' W361.50' N361.50' TO POB 150295.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,995	889	25,629	5,100	39,613		
	2024	7,877	941	27,603	5,100	41,521		

15-12-29-400-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/28/2019	\$1,361,713	2019R00602	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-400-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURVEY ROBERT O CO TR
 C/O U S BANK FARM MANAGEMENT
 3RD FL
 205 S 5TH ST
 SPRINGFIELD IL 62701

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,473** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-29-400-003-00	Class 0021	Acreage 19.700	Print Date 9/23/2024	2023 Taxes: \$ 874.48		ESTIMATED	2024 Taxes: \$ 933.14
Legal Description S1/2 SW1/4 SE1/4 2000-00944 150297.000 99-02081 99-02081 90-05676	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	13,563	0	0	13,563	
	2024	0	14,473	0	0	14,473	

15-12-29-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
 Signed: _____ Date ___ / ___ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-400-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME JOSEPH A AS TRUSTEE
JA BLOOME TRUST #082638

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$58,189** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-29-400-004-00	Class 0021	Acreage 80.490	Print Date 9/23/2024	2023 Taxes: \$ 3,516.06		ESTIMATED	2024 Taxes: \$ 3,751.72
Legal Description E 1/2 SE 1/4 150299.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	54,534	0	0	54,534	
	2024	0	58,189	0	0	58,189	

15-12-29-400-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/01/2015	\$1,555,570	2015R04662	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-29-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COMMONWEALTH EDISON CO
 % REAL ESTATE DEPT
 4TH FL
 3 LINCOLN CTR
 OAKBROOK TERRACE IL 60181

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,980** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-29-700-001-00	Class 7100	Acreage 559.000	Print Date 9/23/2024	2023 Taxes: \$ 901.36		ESTIMATED 2024 Taxes: \$ 901.36	
Legal Description COAL & MINERAL RIGHTS UNDERLYING ALL EX 1A IN NW SE & E1/2 SE TOTAL 559 96-01186 157728.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	13,980	0	13,980	
	2024	0	0	13,980	0	13,980	

15-12-29-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-30-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MEGGINSON INC

Address to send notice if different than shown at left:

5864 E DIVERNON RD
PAWNEE IL 62558

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$35,868** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-30-100-001-00	Class 0021	Acreage 61.500	Print Date 9/23/2024	2023 Taxes: \$ 2,210.30		ESTIMATED	2024 Taxes: \$ 2,312.58
Legal Description N1/2 NW1/4 1991R01424 1974R11765 150303.001		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL
		2023	0	33,136	0	0	33,136
		2024	0	35,868	0	0	35,868

15-12-30-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1991	\$23,400		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-30-100-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$39,769** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-30-100-003-00	Class 0021	Acreage 61.130	Print Date 9/23/2024	2023 Taxes: \$ 2,460.70		ESTIMATED	2024 Taxes: \$ 2,564.09
Legal Description S1/2 FRAC NW1/4 2002-01352 150304.002 2002-01365 88-5992	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	36,938	0	0	36,938	
	2024	0	39,769	0	0	39,769	

15-12-30-100-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-30-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC
%JOSEPH A BLOOME PRES

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,490** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-30-200-001-00	Class 0021	Acreage 39.950	Print Date 9/23/2024	2023 Taxes: \$ 1,684.74		ESTIMATED	2024 Taxes: \$ 1,772.41
Legal Description NW1/4 NE1/4 2002-07682 150301.000 96-03166	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	25,639	0	0	25,639	
	2024	0	27,490	0	0	27,490	

15-12-30-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-30-200-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC
%JOSEPH A BLOOME PRES

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$53,164** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-30-200-002-00	Class 0021	Acreage 80.360	Print Date 9/23/2024	2023 Taxes: \$ 3,216.26		ESTIMATED	2024 Taxes: \$ 3,427.73
Legal Description E1/2 NE1/4 2002-07682 150300.000 93-01604 93-01605	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	49,393	0	0	49,393	
	2024	0	53,164	0	0	53,164	

15-12-30-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1993	\$166,500		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-30-200-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,697** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-30-200-003-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,679.60		ESTIMATED	2024 Taxes: \$ 1,785.76
Legal Description SW1/4 NE1/4 2002-01354 150302.000 2002-01365 88-5992	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	25,805	0	0	25,805	
	2024	0	27,697	0	0	27,697	

15-12-30-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-30-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$12,526** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-30-300-001-00	Class 0021	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 773.72		ESTIMATED	2024 Taxes: \$ 807.61
Legal Description N20.00AC SW1/4 2002-01352 150304.003 2002-01365 88-5992	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	11,591	0	0	11,591	
	2024	0	12,526	0	0	12,526	

15-12-30-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-30-300-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,400** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-30-300-002-00	Class 0021	Acreage 41.480	Print Date 9/23/2024	2023 Taxes: \$ 1,565.02		ESTIMATED	2024 Taxes: \$ 1,637.66
Legal Description S41.48AC N1/2 SW1/4 2002-01354 150304.000 2002-01356 88-5992	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	23,455	0	0	23,455	
	2024	0	25,400	0	0	25,400	

15-12-30-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-30-300-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$36,708** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-30-300-003-00	Class 0021	Acreage 60.910	Print Date 9/23/2024	2023 Taxes: \$ 2,264.62		ESTIMATED	2024 Taxes: \$ 2,366.74
Legal Description S1/2 SW1/4 2002-01353 150305.000 2002-01365 88-5992	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	33,897	0	0	33,897	
	2024	0	36,708	0	0	36,708	

15-12-30-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/2001	\$95,596		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-30-400-001-00 337 E 1300 NORTH RD PAWNEE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ORLANDINI GINO TRUST
% DOMINIC ORLANDINI

9320 FREEDOM WAY NE
ALBUQUERQUE NM 87109

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$108,446** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-30-400-001-00	Class 0011	Acreage 160.160	Print Date 9/23/2024	2023 Taxes: \$ 6,562.20		ESTIMATED	2024 Taxes: \$ 6,992.02
Legal Description SE1/4 150307.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	96,994	0	4,000	100,994	
	2024	0	104,446	0	4,000	108,446	

15-12-30-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-31-100-001-00 1268 N 300 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC

Address to send notice if different than shown at left:

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$103,371** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-31-100-001-00	Class 0011	Acreage 120.000	Print Date 9/23/2024	2023 Taxes: \$ 6,843.36		ESTIMATED	2024 Taxes: \$ 7,443.76
Legal Description NW1/4 2002R01365 2002R01356 2002R01355 1988R05992 150311.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	8,036	67,183	17,675	0	92,894	
	2024	7,920	72,654	22,797	0	103,371	

15-12-31-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-31-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC
% JOSEPH A BLOOME

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$61,099** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-31-200-001-00	Class 0011	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,729.62		ESTIMATED	2024 Taxes: \$ 3,939.34
Legal Description N1/2 NE1/4 150309.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	2,877	52,060	0	2,500	57,437	
	2024	2,877	55,722	0	2,500	61,099	

15-12-31-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
05/02/2016	\$960,000	2016R01604	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-31-200-002-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HIMSTEDT DALE L & SANDRA L

Address to send notice if different than shown at left:

533 E 1275 NORTH RD
MORRISONVILLE IL 62546

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$41,440 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-31-200-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four tick marks.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-31-200-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIMSTEDT DALE L & SANDRA L

Address to send notice if different than shown at left:

533 E 1275 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,536** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-31-200-003-00	Class 0021	Acreage 12.500	Print Date 9/23/2024	2023 Taxes: \$ 526.00		ESTIMATED		2024 Taxes: \$ 542.67
Legal Description E12.50AC S1/2 NE1/4 83-47648 150310.001 97-00996 97-00997&998	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	6,957	0	0	6,957		
	2024	0	7,536	0	0	7,536		

15-12-31-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-31-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME JOSEPH & PHYLLIS

Address to send notice if different than shown at left:

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$67,467** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-31-300-001-00	Class 0021	Acreage 117.000	Print Date 9/23/2024	2023 Taxes: \$ 4,614.86		ESTIMATED	2024 Taxes: \$ 4,858.31
Legal Description SW1/4 150312.000 95-1884	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	61,991	0	0	61,991	
	2024	0	67,467	0	0	67,467	

15-12-31-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
01/30/2006	\$468,000	2006R00422	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-31-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIMSTEDT DALE L & SANDRA L

Address to send notice if different than shown at left:

533 E 1275 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$72,001** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-31-400-001-00	Class 0021	Acreage 120.000	Print Date 9/23/2024	2023 Taxes: \$ 4,890.24		ESTIMATED	2024 Taxes: \$ 5,184.80
Legal Description W3/4 SE1/4 90-01921 150314.000 97-00995 97-00996 97-0997&98	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	66,188	0	0	66,188	
	2024	0	72,001	0	0	72,001	

15-12-31-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ____ / ____ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-31-400-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIMSTEDT DALE L & SANDRA L TRUSTEES

Address to send notice if different than shown at left:

533 E 1275 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,907** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-31-400-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,947.38		ESTIMATED	2024 Taxes: \$ 2,081.60
Legal Description E1/2 E1/2 SE1/4 150315.000 83-47646	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	27,043	0	0	27,043	
	2024	0	28,907	0	0	28,907	

15-12-31-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/13/2022	\$832,000	2022R03743	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-31-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COMMONWEALTH EDISON CO
 % REAL ESTATE DEPT
 4TH FL
 3 LINCOLN CTR
 OAKBROOK TERRACE IL 60181

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,950** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-31-700-001-00	Class 7100	Acreage 320.000	Print Date 9/23/2024	2023 Taxes: \$ 448.10		ESTIMATED	2024 Taxes: \$ 448.10
Legal Description COAL & MIN RIGHTS UNDERLY E1/2 SEC 31 157730.001 96-01186	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	6,950	0	6,950	
	2024	0	0	6,950	0	6,950	

15-12-31-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
 Signed: _____ Date ____ / ____ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-31-700-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-31-700-002-00	Class 7100	Acreage 320.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLY W1/2 SEC 31 157730.000 96-01186	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-12-31-700-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$21,153** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-32-100-001-00	Class 0021	Acreage 33.480	Print Date 9/23/2024	2023 Taxes: \$ 1,266.28		ESTIMATED		2024 Taxes: \$ 1,363.83
Legal Description W1094 N1/2 NW1/4 150320.001 79-29829		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	19,640	0	0	19,640	
		2024	0	21,153	0	0	21,153	

15-12-32-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/2005	\$909,600	2005R06744	No
10/04/2013	\$625,000	2013R04512	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-100-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC
%JOSEPH A BLOOME PRES

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,919** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-32-100-002-00	Class 0021	Acreage 31.780	Print Date 9/23/2024	2023 Taxes: \$ 1,125.22		ESTIMATED	2024 Taxes: \$ 1,219.80
Legal Description W133 1/3 RDS N1/2 NW EX W1094 150320.000 82-40103	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	17,452	0	0	17,452	
	2024	0	18,919	0	0	18,919	

15-12-32-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-100-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURVEY ROBERT O CO TR
 C/O U S BANK FARM MANAGEMENT
 3RD FL
 205 S 5TH ST
 SPRINGFIELD IL 62701

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,961** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-32-100-003-00	Class 0021	Acreage 12.240	Print Date 9/23/2024	2023 Taxes: \$ 540.94		ESTIMATED	2024 Taxes: \$ 577.76
Legal Description E26 2/3RDS N1/2 NW EX S370.88 W343.25 2000-00944 150319.000 99-07751 90-05676 99-02081	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	8,390	0	0	0	8,390
	2024	0	8,961	0	0	0	8,961

15-12-32-100-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-100-004-00 437 E 1275 NORTH RD MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JONES BARRY & DIANE

Address to send notice if different than shown at left:

437 E 1275 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$115,906** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-32-100-004-00	Class 0010	Acreage 2.908	Print Date 9/23/2024	2023 Taxes: \$ 6,662.30		ESTIMATED	2024 Taxes: \$ 6,763.78
Legal Description BG S1323.76 W154.36 NE CR NW 1/4 TH N370.88 W343.35 S370.88 E339.90 TO POB 2001-03319 150319.001 89-9553	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	11,207	0	103,125	0	114,332	
	2024	11,043	0	104,863	0	115,906	

Land Fair Cash Val: 33,129 Building Fair Cash Val: 314,589 **Non-Farm Value: 347,718**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD ELDERLY	6000 5000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-32-100-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-100-005-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIMSTEDT DALE L & SANDRA L

Address to send notice if different than shown at left:

533 E 1275 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24,420** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-32-100-005-00	Class 0021	Acreage 40.180	Print Date 9/23/2024	2023 Taxes: \$ 1,627.08		ESTIMATED	2024 Taxes: \$ 1,758.49
Legal Description SW1/4 NW1/4 150321.000 83-47648	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	22,595	0	0	22,595	
	2024	0	24,420	0	0	24,420	

15-12-32-100-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-100-006-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOLMES JOHN R & DARLA J

Address to send notice if different than shown at left:

7549 PARKTRACE LN SE
OWENS X RDS AL 35763

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,161** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-32-100-006-00	Class 0021	Acreage 40.240	Print Date 9/23/2024	2023 Taxes: \$ 1,896.24		ESTIMATED	2024 Taxes: \$ 2,027.88
Legal Description SE1/4 NW1/4 150322.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	26,333	0	0	26,333	
	2024	0	28,161	0	0	28,161	

15-12-32-100-006-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/2015	\$523,100	2015R04665	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CURVEY ROBERT O CO TR
 C/O U S BANK FARM MANAGEMENT
 3RD FL
 205 S 5TH ST
 SPRINGFIELD IL 62701

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,574** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-32-200-001-00	Class 0021	Acreage 40.260	Print Date 9/23/2024	2023 Taxes: \$ 1,856.42		ESTIMATED	2024 Taxes: \$ 1,971.25
Legal Description NW1/4 NE1/4 2000-00944 150317.000 99-07751 90-05676 99-02081	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	28,793	0	0	28,793	
	2024	0	30,574	0	0	30,574	

15-12-32-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --
 Signed: _____ Date ____ / ____ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-200-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME JOSEPH A AS TRUSTEE
JA BLOOME TRUST #082638

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,758** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-32-200-002-00	Class 0021	Acreage 40.290	Print Date 9/23/2024	2023 Taxes: \$ 1,865.26		ESTIMATED		2024 Taxes: \$ 1,983.11
Legal Description NE 1/4 NE 1/4 150316.000		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	28,930	0	0	28,930	
		2024	0	30,758	0	0	30,758	

15-12-32-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
12/01/2015	\$1,555,570	2015R04662	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-200-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOLMES JOHN R & DARLA J

Address to send notice if different than shown at left:

7549 PARKTRACE LN SE
OWENS X RDS AL 35763

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$48,963** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-32-200-003-00	Class 0021	Acreage 80.840	Print Date 9/23/2024	2023 Taxes: \$ 3,278.76		ESTIMATED	2024 Taxes: \$ 3,525.83
Legal Description S1/2 NE1/4 150318.000 89-10744	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	45,532	0	0	45,532	
	2024	0	48,963	0	0	48,963	

15-12-32-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/01/1989	\$112,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIMSTEDT DALE L & SANDRA L TRUSTEES

Address to send notice if different than shown at left:

533 E 1275 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,054** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-32-300-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 2,030.04		ESTIMATED		2024 Taxes: \$ 2,164.19
Legal Description W1/2 W1/2 SW1/4 150323.001 83-47646		YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
		2023	0	28,191	0	0	28,191	
		2024	0	30,054	0	0	30,054	

15-12-32-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/13/2022	\$832,000	2022R03743	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-300-002-00 1233 N 420 EAST RD MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HIMSTEDT DALE L & SANDRA L

Address to send notice if different than shown at left:

533 E 1275 NORTH RD
MORRISONVILLE IL 62546

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$43,148 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-12-32-300-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount, Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Table with columns: Date Sold, Sale Price, Doc#, Qualified? (Sales History)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: Date / /2024

Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-300-002-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIMSTEDT DALE L & SANDRA L

Address to send notice if different than shown at left:

533 E 1275 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$60,149** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-32-300-002-01	Class 0011	Acreage 36.700	Print Date 9/23/2024	2023 Taxes: \$ 4,212.82		ESTIMATED	2024 Taxes: \$ 4,331.34
Legal Description E1/2 W1/2 SW1/4 EX BEG SE COR E1/2 W1/2 SW1/4 N1313.20' TO POB W334' N430' E334' S430' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	24,503	0	34,000	58,503	
	2024	0	26,149	0	34,000	60,149	

15-12-32-300-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
07/01/2008	\$92,700	2008R03507	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-300-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME PHYLLIS F AS TRUSTEE
PF BLOOME TRUST #061338

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$38,297** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-32-300-003-00	Class 0021	Acreage 52.000	Print Date 9/23/2024	2023 Taxes: \$ 2,584.66		ESTIMATED	2024 Taxes: \$ 2,757.77
Legal Description N11/16 E1/2 SW1/4 EX 3.00AC IN SW COR 150324.000 95-01277	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	35,893	0	0	35,893	
	2024	0	38,297	0	0	38,297	

15-12-32-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT
15-12-32-300-004-00 1228 N 420 EAST RD MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BETHARD SAMUEL WM

Address to send notice if different than shown at left:

1228 N 420 EAST RD
 MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$30,913** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-32-300-004-00	Class 0010	Acreage 3.000	Print Date 9/23/2024	2023 Taxes: \$ 1,849.08	ESTIMATED			2024 Taxes: \$ 1,793.99
Legal Description W361 1/2 S361 1/2 N11/16 OF E1/2 SW1/4 MHRE 150324.001 2001-02128 361X361 92-04518 95-01971 98-03959	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	11,420	0	20,258	0	31,678		
	2024	11,253	0	19,660	0	30,913		

Land Fair Cash Val: 33,759 Building Fair Cash Val: 58,980 **Non-Farm Value: 92,739**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/25/2006	\$72,000	2006R00363	Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-32-300-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-300-005-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ALLISON BARBARA BETH & LESTER TRUSTE

Address to send notice if different than shown at left:

7 BRADEN CT
VIRDEN

IL 62690

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$14,751** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-32-300-005-00	Class 0021	Acreage 25.000	Print Date 9/23/2024	2023 Taxes: \$ 985.18		ESTIMATED 2024 Taxes: \$ 1,062.22	
Legal Description S5/16 E1/2 SW1/4 150325.000 87-55 90-04118 91-00061	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	13,681	0	0	13,681	
	2024	0	14,751	0	0	14,751	

15-12-32-300-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOLMES JOHN R & DARLA J

Address to send notice if different than shown at left:

7549 PARKTRACE LN SE
OWENS X RDS AL 35763

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$93,815** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-32-400-001-00	Class 0021	Acreage 160.000	Print Date 9/23/2024	2023 Taxes: \$ 6,275.62		ESTIMATED	2024 Taxes: \$ 6,755.63
Legal Description SE1/4 150326.000 93-01729 93-01730	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	87,149	0	0	87,149	
	2024	0	93,815	0	0	93,815	

15-12-32-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COMMONWEALTH EDISON CO
 % REAL ESTATE DEPT
 4TH FL
 3 LINCOLN CTR
 OAKBROOK TERRACE IL 60181

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,050** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-32-700-001-00	Class 7100	Acreage 440.000	Print Date 9/23/2024	2023 Taxes: \$ 363.66		ESTIMATED	2024 Taxes: \$ 363.65
Legal Description COAL & MINERAL RIGHTS UNDERLY S3/4 SEC 32 EX SE1/4 NW1/4 192A TO BE MINED 157731.000 96-01186	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	5,050	0	5,050	
	2024	0	0	5,050	0	5,050	

15-12-32-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-32-700-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-32-700-002-00	Class 7100	Acreage 120.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLY NW1/4 NE1/4 & N1/2 NW1/4 157731.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-12-32-700-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-33-100-001-00 MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC
ATTN JOSEPH A BLOOME PRESIDENT

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,542** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-33-100-001-00	Class 0021	Acreage 32.930	Print Date 9/23/2024	2023 Taxes: \$ 1,111.68		ESTIMATED	2024 Taxes: \$ 1,195.49
Legal Description N1/2 NW1/4 EX ALL THAT WEST OF WATERWAY 150330.000 B226 P69	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	17,242	0	0	17,242	
	2024	0	18,542	0	0	18,542	

15-12-33-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/03/2015	\$637,500	2015R03016	No
12/01/2015	\$2,305,195	2015R04652	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-33-100-001-01 533 E 1275 NORTH RD MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIMSTEDT DALE L & SANDRA L TRUSTEE

Address to send notice if different than shown at left:

533 E 1275 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$134,074** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-33-100-001-01	Class 0011	Acreage 48.860	Print Date 9/23/2024	2023 Taxes: \$ 7,742.96		ESTIMATED		2024 Taxes: \$ 8,257.53
Legal Description N1/2 NW1/4 EX ALL THAT EAST OF WATERWAY 150330.000 B226 P69	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,066	26,332	55,695	37,000	126,093		
	2024	6,963	28,234	61,877	37,000	134,074		

15-12-33-100-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
08/03/2015	\$637,500	2015R03016	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-33-100-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUESINGER JAMES P

Address to send notice if different than shown at left:

797 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$28,492** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-33-100-002-00	Class 0021	Acreage 45.000	Print Date 9/23/2024	2023 Taxes: \$ 1,910.64	ESTIMATED			2024 Taxes: \$ 2,051.71
Legal Description SW1/4 NW1/4 EX E1/2 NE1/4 SW1/4 NW1/4 & S1/2 W1/2 SE1/4 NW1/4 93-07586 150331.000 89-7240-7246	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	26,533	0	0	26,533		
	2024	0	28,492	0	0	28,492		

15-12-33-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-33-100-002-01 522 E 1275 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUESINGER DONNA

797 E 1250 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$67,724** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-33-100-002-01	Class 0011	Acreage 15.000	Print Date 9/23/2024	2023 Taxes: \$ 4,009.82		ESTIMATED	2024 Taxes: \$ 4,876.81
Legal Description N1/2 E1/2 W3/4 S1/2 NW1/4 150331.001 91-00833 89-7247	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	8,442	5,984	23,258	18,000	55,684	
	2024	8,320	6,507	34,897	18,000	67,724	

15-12-33-100-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-33-100-003-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

3D FAMILY FARMS
%JOHN R & DARLA HOLMES

7549 PARKTRACE LN SE
OWENS X RDS AL 35763

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$15,634 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-33-100-003-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___/___/2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-33-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BLOOME FARMS INC
ATTN JOSEPH A BLOOME PRESIDENT

308 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$57,693** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-33-200-001-00	Class 0021	Acreage 81.630	Print Date 9/23/2024	2023 Taxes: \$ 3,479.26		ESTIMATED	2024 Taxes: \$ 3,719.74
Legal Description N1/2 NE1/4 150328.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	53,963	0	0	53,963	
	2024	0	57,693	0	0	57,693	

15-12-33-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/01/2015	\$3,166,135	2015R04659	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-33-200-003-00 578 E 1275 NORTH RD MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

3D FAMILY FARMS
%JOHN R & DARLA HOLMES

7549 PARKTRACE LN SE
OWENS X RDS AL 35763

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$75,708** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-33-200-003-00	Class 0011	Acreage 78.240	Print Date 9/23/2024	2023 Taxes: \$ 5,194.16		ESTIMATED	2024 Taxes: \$ 5,451.74
Legal Description W1/2 SW1/4 NE1/4 & E60.00AC S1/2 NE1/4 EX 1.76AC 2004R02272 150329.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	55,131	0	17,000	72,131	
	2024	0	58,708	0	17,000	75,708	

15-12-33-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-33-200-004-00 582 E 1275 NORTH RD MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

WAKE RICHARD S & VALORIE

Address to send notice if different than shown at left:

582 E 1275 NORTH RD MORRISONVILLE IL 62546

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$56,087 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

Land Fair Cash Val: 25,911 Building Fair Cash Val: 142,350 Non-Farm Value: 168,261

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Table with columns: Exemption History, Amount, Tax Year 2023, Tax Year 2024.

Table with columns: Sales History, Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-33-200-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-33-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BIGGS DONNA M

Address to send notice if different than shown at left:

2512 CHICORY DR
SPRINGFIELD

IL 62711

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$66,318** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-33-300-001-00	Class 0021	Acreage 86.750	Print Date 9/23/2024	2023 Taxes: \$ 4,484.94		ESTIMATED	2024 Taxes: \$ 4,775.57
Legal Description N1/2 NE1/4 SW1/4 & W1/2 SW1/4 EX S13.25AC W1/2 SW1/4 150333.000 93-00119 87-54	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	62,282	0	0	62,282	
	2024	0	66,318	0	0	66,318	

15-12-33-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-33-300-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BIGGS DONNA M

Address to send notice if different than shown at left:

2512 CHICORY DR
SPRINGFIELD IL 62711

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10,404** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-33-300-001-01	Class 0021	Acreage 13.250	Print Date 9/23/2024	2023 Taxes: \$ 704.56		ESTIMATED	2024 Taxes: \$ 749.19
Legal Description 13.25AC W1/2 SW1/4 150333.001 92-01631 93-00119	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	9,784	0	0	9,784	
	2024	0	10,404	0	0	10,404	

15-12-33-300-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-33-300-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUESINGER JOHN T

Address to send notice if different than shown at left:

735 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$29,739** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-33-300-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 2,006.56		ESTIMATED		2024 Taxes: \$ 2,141.51
Legal Description S1/2 NE1/4 SW1/4 & N1/2 SE1/4 SW1/4 150334.000 94-01739	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	27,865	0	0	27,865		
	2024	0	29,739	0	0	29,739		

15-12-33-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
05/16/2006	\$184,000	2006R02355	Yes
05/19/2006	\$61,333	2006R02446	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-33-300-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

3D FAMILY FARMS
%JOHN R & DARLA HOLMES

7549 PARKTRACE LN SE
OWENS X RDS AL 35763

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$15,721** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-33-300-003-00	Class 0021	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 1,064.54		ESTIMATED	2024 Taxes: \$ 1,132.07
Legal Description S1/2 SE1/4 SW1/4 150336.000 2004R02272	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	14,783	0	0	14,783	
	2024	0	15,721	0	0	15,721	

15-12-33-300-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-33-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

3D FAMILY FARMS
%JOHN R & DARLA HOLMES

7549 PARKTRACE LN SE
OWENS X RDS AL 35763

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$60,035** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-33-400-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 4,053.16		ESTIMATED	2024 Taxes: \$ 4,323.13
Legal Description W1/2 SE1/4 150337.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	56,286	0	0	56,286	
	2024	0	60,035	0	0	60,035	

15-12-33-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
10/13/2006	\$2,268,312	2006R05116	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-33-400-002-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

VANZANT DON M & NINA L

Address to send notice if different than shown at left:

1009 FORREST CT
VERSAILLES KY 40383

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$44,437 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-33-400-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Four horizontal lines for valuation input.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-33-400-003-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VANZANT DON M & NINA L

Address to send notice if different than shown at left:

1009 FORREST CT
VERSAILLES KY 40383

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,218** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-33-400-003-00	Class 0021	Acreage 10.000	Print Date 9/23/2024	2023 Taxes: \$ 417.74		ESTIMATED	2024 Taxes: \$ 447.76
Legal Description S10.00AC E1/2 SE1/4 150338.000 89-6261	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	5,801	0	0	5,801	
	2024	0	6,218	0	0	6,218	

15-12-33-400-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-33-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-33-700-001-00	Class 7100	Acreage 480.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLYING S 3/4 TOTAL 240 A TO BE MINED 157732.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-12-33-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BECKMIER CRAIG

694 E 1100 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$31,444** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-100-001-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,910.14		ESTIMATED	2024 Taxes: \$ 2,027.34
Legal Description NW1/4 NW1/4 150341.000 88-318	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	29,626	0	0	29,626	
	2024	0	31,444	0	0	31,444	

15-12-34-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-100-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUESINGER JOHN T

Address to send notice if different than shown at left:

735 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$27,692** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-100-001-01	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,666.42		ESTIMATED		2024 Taxes: \$ 1,785.43
Legal Description NE 1/4 NW 1/4 150341.001 91-00743 88-320 2004R03914 UNDIV 1/2 INT	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	25,846	0	0	25,846		
	2024	0	27,692	0	0	27,692		

15-12-34-100-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
01/01/1988	\$63,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-100-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

OLYMPUS FARMS LLC
C/O AGVEST ADVISORS

PO BOX 167
BETHALTO

IL 62010

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$53,763** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024


Reason(s) for Change:

Parcel Number 15-12-34-100-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,609.58		ESTIMATED	2024 Taxes: \$ 3,871.48
Legal Description S1/2 NW1/4 150342.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	50,126	0	0	50,126	
	2024	0	53,763	0	0	53,763	

15-12-34-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Exemption History Amount
Tax Year

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
05/11/2016	\$3,380,000	2016R01701	No
04/09/2018	\$840,000	2018R01027	No
03/29/2019	\$840,000	2019R00959	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-200-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RED ROCK FARMS LLC
%BRUCE NATION
795 E 1250 NORTH RD

TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$62,526** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-200-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,791.32		ESTIMATED		2024 Taxes: \$ 4,031.35
Legal Description N1/2 NE1/4 150339.000 86-13224	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	58,803	0	0	58,803		
	2024	0	62,526	0	0	62,526		

15-12-34-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
02/01/1986	\$136,000		Yes
05/11/2016	\$3,380,000	2016R01701	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-200-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUESINGER JOHN T

Address to send notice if different than shown at left:

735 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$56,824** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-200-002-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,427.48		ESTIMATED	2024 Taxes: \$ 3,663.71
Legal Description S1/2 NE1/4 150340.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	53,160	0	0	53,160	
	2024	0	56,824	0	0	56,824	

15-12-34-200-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-300-001-00 643 E 1200 NORTH RD MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUESINGER HENRY A TRUSTEE

Address to send notice if different than shown at left:

610 W PAULINE ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$139,111** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-300-001-00	Class 0011	Acreage 163.120	Print Date 9/23/2024	2023 Taxes: \$ 8,984.42		ESTIMATED		2024 Taxes: \$ 10,017.40
Legal Description SW1/4 150344.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,569	98,124	18,573	3,500	124,766		
	2024	4,500	105,564	25,547	3,500	139,111		

15-12-34-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

<u>Exemption History</u>	<u>Amount</u>
Tax Year 2023 OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-400-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUESINGER HENRY A TRUSTEE

Address to send notice if different than shown at left:

610 W PAULINE ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$26,244** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-400-001-00	Class 0021	Acreage 40.670	Print Date 9/23/2024	2023 Taxes: \$ 1,754.68		ESTIMATED	2024 Taxes: \$ 1,889.83
Legal Description NW1/4 SE1/4 150345.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	24,367	0	0	24,367	
	2024	0	26,244	0	0	26,244	

15-12-34-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-400-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BOYD RICHARD A

Address to send notice if different than shown at left:

PO BOX 707
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$85,428** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-400-002-00	Class 0021	Acreage 122.470	Print Date 9/23/2024	2023 Taxes: \$ 5,755.70		ESTIMATED	2024 Taxes: \$ 6,151.68
Legal Description SW1/4 SE1/4 & E1/2 SE1/4 150347.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	79,929	0	0	79,929	
	2024	0	85,428	0	0	85,428	

15-12-34-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-700-001-00	Class 7100	Acreage 320.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLY SE1/4 & N1/2 SW1/4& S1/2 NW1/4 71 LEFT TO MINE 157733.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-12-34-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-700-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-700-002-00	Class 7100	Acreage 240.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLY NE1/4 & N1/2 NW1/4 157733.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-12-34-700-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MANSFIELD CLIFFORD B & LINDA G

Address to send notice if different than shown at left:

1747 N 800 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$24** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-00	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description ROYALTY INT KINCAID UNIT PRTS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 0.00098770	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	24	0	24		
	2024	0	0	24	0	24		

15-12-34-750-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

THE MUSKEGON DEVELOPMENT INC

Address to send notice if different than shown at left:

1425 S MISSION RD
MT PLEASANT MI 48858

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-01	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description OIL LSE WORKING INT KINCAID UNIT PRTS OF SECS 2 3 4 9 10 11-13-14-15 16-34 22	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	
	2024	0	0	0	0	0	0	

15-12-34-750-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MITCHELL CHRIS A & BARBARA

Address to send notice if different than shown at left:

PO BOX 254
CARM

IL 62821

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-02	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE WORKING INT KINCAID UNIT PRS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-34-750-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-03

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

JULIAN CARL L & LEONA

Address to send notice if different than shown at left:

1363 COUNTY ROAD 865 E
CARMIL IL 62821

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-03	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE WORKING INT KINCAID UNIT PRS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-12-34-750-001-03

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-04

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ANDERSON NANCY

Address to send notice if different than shown at left:

9789 CALEB RD
ARGENTA IL 62501

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-04	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	100	0	100	
	2024	0	0	100	0	100	

15-12-34-750-001-04

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-05

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AULICH GENE

Address to send notice if different than shown at left:

PO BOX 9267
SPRINGFIELD

IL 62791

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-05	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00010871	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-12-34-750-001-05

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-06

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AULICH LARRY

Address to send notice if different than shown at left:

9788 BERRY MEADOW WAY
SODDY DAISY TN 37379

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-06	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00010871	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-12-34-750-001-06

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-08

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BEATTY SHARON L

Address to send notice if different than shown at left:

412 N THORNWOOD DR
MCHENRY IL 60050

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$150** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-08	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.08	ESTIMATED			2024 Taxes: \$ 11.07
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00057071	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	150	0	150		
	2024	0	0	150	0	150		

15-12-34-750-001-08

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-09

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BEAVERS DENNIS R

Address to send notice if different than shown at left:

PO BOX 236
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-09	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82		ESTIMATED	2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00042173	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	160	0	160	
	2024	0	0	160	0	160	

15-12-34-750-001-09

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-10

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BECHELLI DONA J & PIETRO A

Address to send notice if different than shown at left:

PO BOX 352
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-10	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00010806	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-34-750-001-10

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-11

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRIDGWATER WAYNE

Address to send notice if different than shown at left:

300 S TOWER RD
DAWSON

IL 62520

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-11	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00021742	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-34-750-001-11

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-12

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCCONNELL DEBRA KAYE

Address to send notice if different than shown at left:

PO BOX 253
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-12	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82		ESTIMATED	2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00020214	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	160	0	160	
	2024	0	0	160	0	160	

15-12-34-750-001-12

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-13

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COCHRAN THOMAS TRUST
 %MORGAN STANLEY
 STE A
 944 CLOCK TOWER DR
 SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-13	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82		ESTIMATED	2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	160	0	160	
	2024	0	0	160	0	160	

15-12-34-750-001-13

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
 Signed: _____ Date ___ / ___ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-14

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SABRE GROUP LLC

Address to send notice if different than shown at left:

PO BOX 3074
CARBONDALE IL 62902

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-14	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00035360	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	22	0	22		
	2024	0	0	22	0	22		

15-12-34-750-001-14

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-15

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DALY ANITA

Address to send notice if different than shown at left:

1427 N 1025 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$150** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-15	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.08		ESTIMATED	2024 Taxes: \$ 11.07
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00182401	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	150	0	150	
	2024	0	0	150	0	150	

15-12-34-750-001-15

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-16

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DAMBACHER LAWRENCE A TRUST
%BLANCHE DAMBACHER TRUSTEE
957 E 1500 NORTH RD

TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-16	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82		ESTIMATED	2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00065227	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	160	0	160	
	2024	0	0	160	0	160	

15-12-34-750-001-16

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-17

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ORLANDINI JAMES FARMS LLC

Address to send notice if different than shown at left:

PO BOX 6055
SPRINGFIELD IL 62708

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-17	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82		ESTIMATED	2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00072701	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	160	0	160	
	2024	0	0	160	0	160	

15-12-34-750-001-17

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-18

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DITTMEIER FRANK L

Address to send notice if different than shown at left:

9410 WHITE AVE
BRENTWOOD MO 63144

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-18	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00010195	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-34-750-001-18

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-19

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GERMAN GARY

Address to send notice if different than shown at left:

5610 LASSEN ST
KEYSTONE HGTS FL 32656

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-19	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00000627	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-12-34-750-001-19

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-20

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GERMAN LESTER E

Address to send notice if different than shown at left:

PO BOX 5644
SPRINGFIELD

IL 62705

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-20	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-34-750-001-20

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-21

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

GIOVAGNOLI FRED

Address to send notice if different than shown at left:

10 TEN EYKE CIR
PITTSFORD NY 14534

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$100 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-34-750-001-21

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-22

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GLATZ DOROTHY

2033 S GLENWOOD AVE
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-22	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00013040	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-12-34-750-001-22

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-23

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GLOVER CALVIN G

77

10581 RUTHERFORD RD

CLEVELAND TX 77328

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-23	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00028535	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-34-750-001-23

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-24

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GLOVER JOHN H

Address to send notice if different than shown at left:

920 TECATE PL
EL PASO TX 79912

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-24	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-34-750-001-24

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-25

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

GLOVER ROBERT E

APT 112
1302 N SHILOH RD
GARLAND TX 75042

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-25	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-34-750-001-25

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-26

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CNX RESOURCES
 %PROPERTY TAX DEPT
 STE 400
 1000 HORIZON VUE DR
 CANONSBURG PA 15317

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8,462** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-26	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 624.38	ESTIMATED			2024 Taxes: \$ 624.37
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.10326931	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	8,462	0	8,462		
	2024	0	0	8,462	0	8,462		

15-12-34-750-001-26

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
 Signed: _____ Date ____ / ____ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-27

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HANLEY WILLIAM S

Address to send notice if different than shown at left:

PO BOX 154
BROOKLIN

ME 04616

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-27	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82	ESTIMATED			2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00034849	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	160	0	160		
	2024	0	0	160	0	160		

15-12-34-750-001-27

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-28

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

NICKERSON JULIAASHMORE

STE J220
3801 N CAPITAL OF TEXAS HWY
AUSTIN TX 78746

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-28	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82		ESTIMATED	2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	160	0	160	
	2024	0	0	160	0	160	

15-12-34-750-001-28

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-29

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIBBARD DAVID

5679 MARBLESTONE DR
GRANITE FALLS NC 28630

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$150** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-29	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.08	ESTIMATED			2024 Taxes: \$ 11.07
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00083277	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	150	0	150		
	2024	0	0	150	0	150		

15-12-34-750-001-29

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ___ / ___ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-30

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HILL IONE M

Address to send notice if different than shown at left:

5733 SUNSET RD
WESTWORTH VILLAGE TX 76114

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-30	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00018803	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-12-34-750-001-30

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-31

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HOLLIS DAVID & MARIGALE

Address to send notice if different than shown at left:

218 WILDROSE LN
ROCHESTER IL 62563

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-31	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82	ESTIMATED			2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00062391	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	160	0	160		
	2024	0	0	160	0	160		

15-12-34-750-001-31

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-32

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

J B & ASSOCIATES

Address to send notice if different than shown at left:

234 FORESTDALE RD
ASHLAND KY 41102

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-32	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0		
	2024	0	0	0	0	0		

15-12-34-750-001-32

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-33

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KAHN LINDA S REV TRUST
%LINDA KAHN TRUSTEE

10 MARYVIEW LN
SAINT LOUIS MO 63124

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$827** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-33	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 61.02		ESTIMATED	2024 Taxes: \$ 61.02
Legal Description OIL LSE ROYALTY & ORR INT KINCAID UNIT LSE#3001 R 0.00015446 ORR 0.00170514	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	827	0	827	
	2024	0	0	827	0	827	

15-12-34-750-001-33

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-34

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LEFEBVRE KAY A

Address to send notice if different than shown at left:

5679 MARBLESTONE DR
GRANITE FALLS NC 28630

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$220** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-34	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 16.24		ESTIMATED	2024 Taxes: \$ 16.23
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00083277	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	220	0	220	
	2024	0	0	220	0	220	

15-12-34-750-001-34

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-35

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LEHMAN MARY K

Address to send notice if different than shown at left:

18 DREIER BLVD
EVANSVILLE IN 47712

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-35	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE ORR INT KINCAID UNIT LSE#3001 0.00021315	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-34-750-001-35

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-36

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARAS FRANK & RETA REVOLKABLE LIVING

Address to send notice if different than shown at left:

PO BOX 416
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-36	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82		ESTIMATED	2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00075980	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	160	0	160	
	2024	0	0	160	0	160	

15-12-34-750-001-36

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-37

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MARAS IVAN E & LORENE R

UNIT 6A
1111 COMMUNITY DR
ROCHESTER IL 62563

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$280** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-37	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 20.66		ESTIMATED	2024 Taxes: \$ 20.66
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00076428	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	280	0	280	
	2024	0	0	280	0	280	

15-12-34-750-001-37

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-38

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCARDLE MARY JO TRUST
%H ORLANDINI JR TRUSTEE

1120 W MAIN CROSS ST
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-38	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-34-750-001-38

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-39

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MESSERSMITH BARBARA

Address to send notice if different than shown at left:

307 SUNRISE CIR
GROVE OK 74344

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$150** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-39	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.08	ESTIMATED			2024 Taxes: \$ 11.07
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00089508	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	150	0	150		
	2024	0	0	150	0	150		

15-12-34-750-001-39

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-40

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MICHEL ROBERT

Address to send notice if different than shown at left:

738 E 1700 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-40	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82		ESTIMATED	2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00061901	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	160	0	160	
	2024	0	0	160	0	160	

15-12-34-750-001-40

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-41

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILLER DIANE

Address to send notice if different than shown at left:

6117 GREENWALT DR
SPRINGFIELD IL 62711

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-41	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY & OVERRIDING INT KINCAID UNIT LSE#3001 ORR 0.00008762 R 0.00017524	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-34-750-001-41

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-42

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOTTERSHAW VERONA

Address to send notice if different than shown at left:

PO BOX 124
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-42	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-34-750-001-42

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-43

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ORLANDINI GINO TRUST
% DOMINIC ORLANDINI

9320 FREEDOM WAY NE
ALBUQUERQUE NM 87109

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$150** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-43	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.08	ESTIMATED			2024 Taxes: \$ 11.07
Legal Description OIL LSE ROYALTY & ORR INT KINCAID UNIT LSE#3001 O 0.00017524 R 0.00035046	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	150	0	150		
	2024	0	0	150	0	150		

15-12-34-750-001-43

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-44

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ORLANDINI HUGO H JR

Address to send notice if different than shown at left:

1120 W MAIN CROSS ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-44	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-12-34-750-001-44

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-45

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ORLANDINI JAMES FARMS LLC

Address to send notice if different than shown at left:

PO BOX 6055
SPRINGFIELD IL 62708

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-45	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-34-750-001-45

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-46

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ORLANDINI MARGIE TRUST
% H ORLANDINI JR TRUSTEE

1120 W MAIN CROSS ST
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-46	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-12-34-750-001-46

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-47

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PASSINI VERA M

Address to send notice if different than shown at left:

10772 WALNUT ST
ROCHESTER IL 62563

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-47	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-12-34-750-001-47

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-48

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEROZZO ROBERT R

Address to send notice if different than shown at left:

PO BOX 1125
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$300** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-48	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 22.14	ESTIMATED			2024 Taxes: \$ 22.14
Legal Description OIL LSE ROYALTY & WORKING INT KINCAID UNIT LSE#3001 W 0.00046339 R 0.00066344	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	300	0	300		
	2024	0	0	300	0	300		

15-12-34-750-001-48

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-49

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PEROZZO JOHN WAYNE

Address to send notice if different than shown at left:

PO BOX 463
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$457** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-49	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 33.72		ESTIMATED	2024 Taxes: \$ 33.72
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00165862	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	457	0	457	
	2024	0	0	457	0	457	

15-12-34-750-001-49

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-50

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PURCELL DEL

Address to send notice if different than shown at left:

8108 SYCAMORE CREEK DR
LOUISVILLE KY 40222

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$277** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-50	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 20.44		ESTIMATED	2024 Taxes: \$ 20.44
Legal Description OIL LSE ORR INT KINCAID UNIT LSE#3001 0.00055951	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	277	0	277	
	2024	0	0	277	0	277	

15-12-34-750-001-50

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-51

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

REILLY MARY P

Address to send notice if different than shown at left:

7219 BRAEMAR CIR
VILLAGE OF LAKEWOOD IL 60014

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-51	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82		ESTIMATED	2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00034849	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	160	0	160	
	2024	0	0	160	0	160	

15-12-34-750-001-51

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-52

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SABRE INVESTMENTS LLC

Address to send notice if different than shown at left:

PO BOX 3074
CARBONDALE IL 62902

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-52	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82		ESTIMATED	2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	160	0	160	
	2024	0	0	160	0	160	

15-12-34-750-001-52

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-53

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ROBERTS GEORGE B II

Address to send notice if different than shown at left:

1141 ABBINGTON DR
UNION KY 41091

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-53	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82		ESTIMATED	2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00035360	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	160	0	160	
	2024	0	0	160	0	160	

15-12-34-750-001-53

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: _____ Date ____ / ____ /2024
Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-54

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ROGGERO NANCY

Address to send notice if different than shown at left:

PO BOX 828
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-54	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82		ESTIMATED	2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00033170	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	160	0	160	
	2024	0	0	160	0	160	

15-12-34-750-001-54

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-55

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCHRYVER FRANCES TRUST
%MARINE BANK TRUSTEE

3050 WABASH AVE
SPRINGFIELD IL 62704

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-55	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82		ESTIMATED	2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00036469	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	160	0	160	
	2024	0	0	160	0	160	

15-12-34-750-001-55

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-56

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MIDLAND STATES BANK AS SUCCESSOR TRI
ATTN CAROL D CRAIG SENIOR PRIVATE WEA

1201 NETWORK CENTRE DR
EFFINGHAM IL 62401

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-56	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	100	0	100	
	2024	0	0	100	0	100	

15-12-34-750-001-56

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-58

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SMITH VIRGIL E
%RITA ECKHOFF

PO BOX 414
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$150** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-58	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.08		ESTIMATED	2024 Taxes: \$ 11.07
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	150	0	150	
	2024	0	0	150	0	150	

15-12-34-750-001-58

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-59

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SQUIRES MARY FRANCES

Address to send notice if different than shown at left:

19 TURNBERRY PL
SPRINGFIELD IL 62704

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-59	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00027351	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-34-750-001-59

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-60

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SUTTON BETTY J & LARRY G

Address to send notice if different than shown at left:

327 N CLAY ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-60	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82		ESTIMATED	2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00042041	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	160	0	160	
	2024	0	0	160	0	160	

15-12-34-750-001-60

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-61

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TAGGE STEPHEN

Address to send notice if different than shown at left:

PO BOX 5131
SPRINGFIELD IL 62705

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-61	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.82		ESTIMATED	2024 Taxes: \$ 11.81
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00034849	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	160	0	160	
	2024	0	0	160	0	160	

15-12-34-750-001-61

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-62

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

TROJACK ROBERTA

114 W MAIN
PO BOX 91
THAYER

IL 62689

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$160 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-34-750-001-62

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-63

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VILLAGE OF KINCAID

115 CENTRAL AVE
PO BOX 615
KINCAID

IL 62540

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-63	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00020438	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-34-750-001-63

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-64

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAGNER BARBARA A

APT 226
900 E SOUTHWIND RD
SPRINGFIELD IL 62703

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-64	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00018269	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-34-750-001-64

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-65

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SANDSTONE CREEK LLC
%BRUCE NATION

795 E 1350 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$488** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-65	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 36.02		ESTIMATED	2024 Taxes: \$ 36.01
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.01258312	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	488	0	488	
	2024	0	0	488	0	488	

15-12-34-750-001-65

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-66

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ZOELLNER TROY M

Address to send notice if different than shown at left:

614 HALL DR
SOUTH JACKSONVILLE IL 62650

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$150** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-66	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 11.08	ESTIMATED			2024 Taxes: \$ 11.07
Legal Description OIL LSE ROYALTY INT KINCAID UNIT LSE#3001 0.00008165	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	150	0	150		
	2024	0	0	150	0	150		

15-12-34-750-001-66

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-68

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BECKHAM DWIGHT ESTATE
KENNETH STEVE BECKHAM EXECUTOR

1977 N 600 EAST RD
EDINBURG IL 62531

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-68	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description OIL LSE WORKING INT KINCAID UNIT PRS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE#3001 0.00015573	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	100	0	100		
	2024	0	0	100	0	100		

15-12-34-750-001-68

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-69

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SABRE GROUP LLC

Address to send notice if different than shown at left:

PO BOX 3074
CARBONDALE IL 62902

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-69	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE WORKING INT KINCAID UNIT PRTS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE#3001 0.00034849	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-12-34-750-001-69

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-71

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MANSFIELD CLIFFORD B & LINDA G, JT

Address to send notice if different than shown at left:

1747 N 800 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$18,196** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-71	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 1,342.60	ESTIMATED			2024 Taxes: \$ 1,342.60
Legal Description OIL LSE WORKING INT KINCAID UNIT PRTS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE#3001 0.80142285	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	18,196	0	18,196		
	2024	0	0	18,196	0	18,196		

15-12-34-750-001-71

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-72

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BRIDGWATER WAYNE

Address to send notice if different than shown at left:

300 S TOWER RD
DAWSON

IL 62520

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$8** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-72	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE WORKING INT KINCAID UNIT PRS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE#3001 0.00007723	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	8	0	8	
	2024	0	0	8	0	8	

15-12-34-750-001-72

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-73

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

AULICH GENE

Address to send notice if different than shown at left:

PO BOX 9267
SPRINGFIELD

IL 62791

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$16 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-34-750-001-73

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four vertical tick marks.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-74

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

AULICH LARRY

Address to send notice if different than shown at left:

9788 BERRY MEADOW WAY
SODDY DAISY TN 37379

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$16** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-74	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description OIL LSE WORKING INT KINCAID UNIT PRS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE#3001 0.00015446	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	16	0	16		
	2024	0	0	16	0	16		

15-12-34-750-001-74

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-75

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PATTERSON PEARL
 %OFFICE OF STATE GUARDIAN
 401 MAIN ST
 STE #620
 PEORIA IL 61602

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-75	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KINCAID UNIT PRS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE#3001 0.00002429	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	100	0	100		
	2024	0	0	100	0	100		

15-12-34-750-001-75

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
 Signed: _____ Date ____ / ____ /2024
 Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-76

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

STEWART PRODUCERS INC

Address to send notice if different than shown at left:

PO BOX 546
MOUNT VERNON IL 62864

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-76	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description OIL LSE WORKING INT KINCAID UNIT PRTS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE #3001 91-04871 158301.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	100	0	100		
	2024	0	0	100	0	100		

15-12-34-750-001-76

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-77

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CTJH FARMS LLC

Address to send notice if different than shown at left:

6301 WIND TREE RD
 SPRINGFIELD IL 62712

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$95** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-77	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED 2024 Taxes: \$ 0.00	
Legal Description OIL LSE WORKING INT KINCAID UNIT PRTS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE #3001 0.00092678	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	95	0	95	
	2024	0	0	95	0	95	

15-12-34-750-001-77

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-78

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

UNSBEE RICHARD P

Address to send notice if different than shown at left:

6812 VILLAGE CENTER RD
SHERMAN IL 62684

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-78	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description OIL LSE WORKING INT KINCAID UNIT PRTS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE #3001 0.00032738	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	100	0	100		
	2024	0	0	100	0	100		

15-12-34-750-001-78

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-79

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HEDELL PETER J

Address to send notice if different than shown at left:

2812 SPRING WATER DR
SAINT LOUIS MO 63129

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-79	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description OIL LSE WORKING INT KINCAID UNIT PRS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE #3001 0.00036556	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	100	0	100		
	2024	0	0	100	0	100		

15-12-34-750-001-79

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-80

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MILONCUS ANNE G

Address to send notice if different than shown at left:

401 JAMES ST
BULPITT

IL 62517

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-80	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE WORKING INT KINCAID UNIT PRTS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE #3001 0.00035429	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	100	0	100	
	2024	0	0	100	0	100	

15-12-34-750-001-80

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-81

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOEHLE A H
%JOE SIMPKINS OIL
STE 750
9666 OLIVE BLVD
SAINT LOUIS

MO 63132

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-81	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE WORKING INT KINCAID UNIT PRTS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE #3001 0.00044548	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	100	0	100	
	2024	0	0	100	0	100	

15-12-34-750-001-81

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-82

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MOTTERSHAW VERONA

Address to send notice if different than shown at left:

PO BOX 124
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-82	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE WORKING INT KINCAID UNIT PRS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE #3001 R 0.00021742	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	100	0	100	
	2024	0	0	100	0	100	

15-12-34-750-001-82

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-83

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PATTERSON ROBERT B
DEL MCDONALS 100 OESTE

PO BOX 546
MOUNT VERNON IL 62864

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-83	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description OIL LSE WORKING INT KINCAID UNIT PRTS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE #3001 0.00076808	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	100	0	100		
	2024	0	0	100	0	100		

15-12-34-750-001-83

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-84

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ROGGERO NANCY

Address to send notice if different than shown at left:

PO BOX 828
KINCAID

IL 62540

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-001-84	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description OIL LSE WORKING INT KINCAID UNIT PRS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE #3001 0.00046339	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	100	0	100		
	2024	0	0	100	0	100		

15-12-34-750-001-84

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-85

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WANDS JULIA

Address to send notice if different than shown at left:

1920 E LAKE SHORE DR
SPRINGFIELD IL 62712

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-85	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE WORKING INT KINCAID UNIT PRS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE#3001 0.00035429	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	100	0	100		
	2024	0	0	100	0	100		

15-12-34-750-001-85

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-001-86

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WENTWORTH LISA

Address to send notice if different than shown at left:

6615 N BRUSH COLLEGE RD
 DECATUR IL 62526

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-001-86	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE WORKING INT KINCAID UNIT PRTS OF SECS 2 3 4 9 10 11 13 14 15 16 34 22 LSE #3001 91-04871 158301.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	100	0	100		
	2024	0	0	100	0	100		

15-12-34-750-001-86

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

CNX GAS COMPANY LLC
CNX CENTER

1000 HORIZON VUE DR
CANONSBURG PA 15317

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-002-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KIN CAID UNIT PRTS OF SECS 4 9 10 11 14 15 16 22 23 SEC34 13 3W 158302.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-34-750-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-002-01

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

DEMIER GEORGE

Address to send notice if different than shown at left:

3159 S ROCKFORD DR
TULSA OK 74105

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-002-01	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE WORKING INT SEC 34	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-12-34-750-002-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-002-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

PRH LLC

14 KINGSWOOD CT
WASHINGTON PA 15301

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-002-02	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE ROYALTY INT SEC 34	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-34-750-002-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-003-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

SCHEUNEMAN AIMEE

Address to send notice if different than shown at left:

8424 TIMBER RIDGE DR
EDWARDSVILLE IL 62025

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$100 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-34-750-003-00

Required

Complainant's Estimated Correct Assessed Valuations:

Four vertical lines for inputting assessed valuations.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SOY CAPITAL AG SERVICE
 WOMENS DIVISION 106146 18
 STE A
 3151 GREENHEAD DR
 SPRINGFIELD IL 62711

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-004-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE ROYALTY INT KINCAID UNIT PRTS OF SECS 3 4 9 10 11 14 15 16 22 23 158304.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	0	0	0	0	0
	2024	0	0	0	0	0	0	0

15-12-34-750-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-005-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FRIEND JERRY E

Address to send notice if different than shown at left:

PO BOX 27
FAIRFIELD

IL 62837

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-005-00	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT KIN CAID UNIT 50LSE COMB PRTS OF SECS 3 4 9 10 11 SEC34 14 3W 158305.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	
	2024	0	0	0	0	0	

15-12-34-750-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-006-01

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

EDWARDS JILL

Address to send notice if different than shown at left:

PO BOX 744
FAIRFIELD

IL 62837

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$878 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-34-750-006-01

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Exemption History Amount Tax Year

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

Table for Preliminary Board Decision with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron).

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-006-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

EDWARDS JILL

Address to send notice if different than shown at left:

PO BOX 744
FAIRFIELD

IL 62837

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,125** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-006-02	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 83.02		ESTIMATED	2024 Taxes: \$ 83.01
Legal Description OIL LSE ROYALTY INT SEC 34 KINCAID UNIT	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	1,125	0	1,125	
	2024	0	0	1,125	0	1,125	

15-12-34-750-006-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-006-03

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

HIBBARD JAMES A

Address to send notice if different than shown at left:

4014 W ELWIN RD
MACON IL 62544

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$440** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-006-03	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 32.48	ESTIMATED			2024 Taxes: \$ 32.47
Legal Description OIL LSE ROYALTY INT SEC 34	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	440	0	440		
	2024	0	0	440	0	440		

15-12-34-750-006-03

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-006-04

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

KAIN PATRICK

Address to send notice if different than shown at left:

2 MAPLEHURST DR
ROCHESTER

IL 62563

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-34-750-006-04	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE ROYALTY INT SEC 34	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	100	0	100		
	2024	0	0	100	0	100		

15-12-34-750-006-04

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-006-05

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VANSICE JAY & NELL
 V ARBORS AT WILLIAMSBURG
 APT 420
 1915 POCAHONTAS TRL
 WILLIAMSBURG VA 23185

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
 Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
 Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-006-05	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00	
Legal Description OIL LSE ROYALTY INT SEC 34	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	100	0	100		
	2024	0	0	100	0	100		

15-12-34-750-006-05

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-006-06

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VAN SICE JAY

3907 MARRYAT DR
SPRINGFIELD IL 62711

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-006-06	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT SEC 34	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-12-34-750-006-06

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/05/2010	\$10,000	2010R04491	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-006-07

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCHEUNEMAN AIMEE

Address to send notice if different than shown at left:

8424 TIMBER RIDGE DR
EDWARDSVILLE IL 62025

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-006-07	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE OVERRIDING INT SEC 34	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	100	0	100	
	2024	0	0	100	0	100	

15-12-34-750-006-07

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-006-08

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCHEUNEMAN AIMEE

Address to send notice if different than shown at left:

8424 TIMBER RIDGE DR
EDWARDSVILLE IL 62025

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$0** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-006-08	Class 7202	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description OIL LSE ROYALTY INT SEC 34	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	0	0	0	0
	2024	0	0	0	0	0	0

15-12-34-750-006-08

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-006-09

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCHEUNEMAN RACHEL

Address to send notice if different than shown at left:

371 BLUFF VIEW CIR
SAINT LOUIS MO 63129

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-006-09	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00	ESTIMATED			2024 Taxes: \$ 0.00
Legal Description OIL LSE OVERRIDING INT SEC 34	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	0	100	0	100		
	2024	0	0	100	0	100		

15-12-34-750-006-09

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-006-10

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

SCHEUNEMAN RACHEL

Address to send notice if different than shown at left:

371 BLUFF VIEW CIR
SAINT LOUIS MO 63129

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$100** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-006-10	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED 2024 Taxes: \$ 0.00	
Legal Description OIL LSE ROYALTY INT SEC 34	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	100	0	100	
	2024	0	0	100	0	100	

15-12-34-750-006-10

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-34-750-011-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

LIGHTBODY ALICE

APT 222
7005 STADIUM DR
BRECKSVILLE OH 44141

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$389** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-34-750-011-00	Class 7200	Acreage 0.000	Print Date 9/23/2024	2023 Taxes: \$ 28.70		ESTIMATED	2024 Taxes: \$ 28.70
Legal Description OIL LSE ROYALTY INT KIN CAID UNIT PRS SEC 3 4 9 10 11 13 14 15 16 22 23 & 34 158314.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	389	0	389	
	2024	0	0	389	0	389	

15-12-34-750-011-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-35-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RED ROCK FARMS LLC
%BRUCE NATION
795 E 1250 NORTH RD

TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$62,179** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-35-100-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 3,769.00		ESTIMATED	2024 Taxes: \$ 4,008.97
Legal Description N1/2 NW1/4 150350.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	58,457	0	0	58,457	
	2024	0	62,179	0	0	62,179	

15-12-35-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
05/11/2016	\$3,380,000	25016R01701	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-35-100-002-00 735 E 1250 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BUESINGER JOHN T

Address to send notice if different than shown at left:

735 E 1250 NORTH RD
TAYLORVILLE IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$82,290 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-35-100-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Table with columns: Exemption History, Amount. Rows for Tax Year 2023 and 2024, both showing OWNER OCCUPD with amount 6000.

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. Includes an upward arrow icon.

Table with columns: Date Sold, Sale Price, Doc#, Qualified? under the heading Sales History.

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials. Includes names Joy, Ed, Ron.

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-35-200-001-00 797 E 1250 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUESINGER JAMES P

Address to send notice if different than shown at left:

797 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$160,698** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-35-200-001-00	Class 0011	Acreage 160.000	Print Date 9/23/2024	2023 Taxes: \$ 9,493.38		ESTIMATED		2024 Taxes: \$ 10,360.96
Legal Description NE 1/4 150348.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	7,244	101,139	26,859	12,000	147,242		
	2024	7,140	107,958	33,600	12,000	160,698		

15-12-35-200-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-35-300-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BAINBRIDGE JEAN

Address to send notice if different than shown at left:

13676 TOWERLINE RD
PEKIN IL 61554

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$41,432** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-35-300-001-00	Class 0021	Acreage 60.000	Print Date 9/23/2024	2023 Taxes: \$ 2,500.08		ESTIMATED	2024 Taxes: \$ 2,671.32
Legal Description N3/8 SW1/4 150353.000 92-3576	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	38,776	0	0	38,776	
	2024	0	41,432	0	0	41,432	

15-12-35-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-35-300-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VANGEISON FRED R & ELAINE K

Address to send notice if different than shown at left:

1152 N 700 EAST RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$63,626** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-35-300-002-00	Class 0021	Acreage 100.000	Print Date 9/23/2024	2023 Taxes: \$ 3,804.86		ESTIMATED	2024 Taxes: \$ 4,102.27
Legal Description S5/8 SW1/4 150352.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	59,013	0	0	59,013	
	2024	0	63,626	0	0	63,626	

15-12-35-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
06/30/2008	\$1,030,000	2008R03474	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-35-400-001-00 794 E 1250 NORTH RD MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAYMAN DAVID & JENNIFER

794 E 1250 NORTH RD
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$123,093** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-35-400-001-00	Class 0011	Acreage 120.000	Print Date 9/23/2024	2023 Taxes: \$ 6,627.94		ESTIMATED	2024 Taxes: \$ 7,549.54
Legal Description E 1/2 SE 1/4 & NW 1/4 SE 1/4 150354.001 2001-04145 98-03656	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,209	55,067	36,823	11,700	108,799	
	2024	5,133	59,393	46,867	11,700	123,093	

15-12-35-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
06/06/2011	\$240,000	2011R02447	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-35-400-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

VANGEISON FRED R & ELAINE K

Address to send notice if different than shown at left:

1152 N 700 EAST RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$17,314** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-35-400-002-00	Class 0021	Acreage 40.000	Print Date 9/23/2024	2023 Taxes: \$ 1,014.26		ESTIMATED		2024 Taxes: \$ 1,116.31
Legal Description SW1/4 SE1/4 150355.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	15,731	0	0	15,731		
	2024	0	17,314	0	0	17,314		

15-12-35-400-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
06/30/2008	\$1,030,000	2008R03474	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-35-700-001-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$10 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-35-700-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line with four tick marks.

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-100-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUESINGER JAMES P

Address to send notice if different than shown at left:

797 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$37,064** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-100-001-00	Class 0021	Acreage 80.000	Print Date 9/23/2024	2023 Taxes: \$ 2,162.80		ESTIMATED	2024 Taxes: \$ 2,369.47
Legal Description W1/2 NW1/4 150360.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	33,831	0	0	33,831	
	2024	0	37,064	0	0	37,064	

15-12-36-100-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-100-002-00 837 E 1250 NORTH RD MORRISONVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUESINGER HENRY A TRUSTEE

Address to send notice if different than shown at left:

610 W PAULINE ST
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,470** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-100-002-00	Class 0021	Acreage 5.000	Print Date 9/23/2024	2023 Taxes: \$ 82.86		ESTIMATED		2024 Taxes: \$ 93.98
Legal Description BEG SW COR NW1/4 E1833.20 N544.50 E400 S544.50 W400 TO BEG 150358.000 2004R04584 2002R03965 2004R03912	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	1,296	0	0	1,296		
	2024	0	1,470	0	0	1,470		

15-12-36-100-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-100-002-01

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BUESINGER HENRY A TRUSTEE
BUESINGER HA RTA 020252

610 W PAULINE ST
TAYLORVILLE IL 62568

Address to send notice if different than shown at left:

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$21,259 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-36-100-002-01

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Yes)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-100-002-02

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUESINGER TODD J A
%JOHN T BUESINGER

643 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$1,157** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-100-002-02	Class 0021	Acreage 4.500	Print Date 9/23/2024	2023 Taxes: \$ 67.70		ESTIMATED	2024 Taxes: \$ 73.97
Legal Description E4.50AC NE1/4 NW1/4 95-05701	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	1,059	0	0	1,059	
	2024	0	1,157	0	0	1,157	

15-12-36-100-002-02

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/1995	\$6,613		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-100-003-00 835 E 1250 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

ROOT NICHOLAS H

Address to send notice if different than shown at left:

104 S ROLLING BEND RD
TAYLORVILLE IL 62568

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$51,473 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes, Legal Description, YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL. Includes data for 2023 and 2024.

Land Fair Cash Val: 24,270 Building Fair Cash Val: 130,149 Non-Farm Value: 154,419

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Arrow pointing up)

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?. Includes entry for 01/01/1997 at \$65,000.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

15-12-36-100-003-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-200-001-00

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BUESINGER TODD J A
%JOHN T BUESINGER

643 E 1200 NORTH RD
MORRISONVILLE IL 62546

Address to send notice if different than shown at left:

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$9,370 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-36-200-001-00

Required

Complainant's Estimated Correct Assessed Valuations:

Exemption History Amount
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Yes)

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$ Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-200-002-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

TAYL RIFLE & PISTOL CLUB

Address to send notice if different than shown at left:

PO BOX 321
TAYLORVILLE

IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$22,614** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-200-002-00	Class 0061	Acreage 11.000	Print Date 9/23/2024	2023 Taxes: \$ 1,516.54		ESTIMATED		2024 Taxes: \$ 1,445.69
Legal Description 10.00AC W OF BEAR CREEK S1/2 NE1/4 81-35054 ST DOC# 82-11-5 150357.001 GUN RANGE	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	11,777	0	11,945	0	23,722		
	2024	11,607	0	11,007	0	22,614		

Land Fair Cash Val: 34,821 Building Fair Cash Val: 33,021 **Non-Farm Value: 67,842**

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-36-200-002-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-200-003-00 875 E 1250 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COATE GLENN & SARAH

Address to send notice if different than shown at left:

881 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$13,991** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-200-003-00	Class 0021	Acreage 58.030	Print Date 9/23/2024	2023 Taxes: \$ 828.98		ESTIMATED	2024 Taxes: \$ 894.43
Legal Description S1/2 NE1/4 EX 1.00AC SE COR & EX 10.00AC W OF BEAR CREEK & EX 7.941AC & EX BEG SE COR NE COR TH W 1040.94 TO POB TH N 550 E242 S349 W222 S201 W20	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	12,967	0	0	12,967	
	2024	0	13,991	0	0	13,991	

15-12-36-200-003-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-200-003-01 881 E 1250 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

COATE GLENN B & SARAH L

Address to send notice if different than shown at left:

881 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$84,220** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-200-003-01	Class 0010	Acreage 7.941	Print Date 9/23/2024	2023 Taxes: \$ 5,107.56		ESTIMATED	2024 Taxes: \$ 5,000.54
Legal Description BEG SE COR NE 1/4 N208.80 POB N376.20 W683.94 S319.76 E16 S316 E645 N208.80 E208.80 TO BEG 98-06008	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	17,803	0	68,091	0	85,894	
	2024	17,540	0	66,680	0	84,220	

Land Fair Cash Val: 52,620 Building Fair Cash Val: 200,040 **Non-Farm Value: 252,660**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	OWNER OCCUPD	6000
2024	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-36-200-003-01

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-200-003-02 875 E 1250 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MORGAN THOMAS & BRITTANY

Address to send notice if different than shown at left:

875 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$52,534** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-200-003-02	Class 0010	Acreage 2.030	Print Date 9/23/2024	2023 Taxes: \$ 2,730.94		ESTIMATED 2024 Taxes: \$ 2,974.88	
Legal Description BEG SE COR NE COR TH W 1040.94 TO POB TH W20'N550 E242 S349 W222 S201 TO POB.	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	9,574	0	42,329	0	51,903	
	2024	9,207	0	43,327	0	52,534	

Land Fair Cash Val: 27,621 Building Fair Cash Val: 129,981 **Non-Farm Value: 157,602**

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023	
IMPROVEMENT OWNER OCCUPD	3185 6000
<u>Tax Year</u> 2024	
OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/01/2021	\$95,000	2021R04627	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-36-200-003-02

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-200-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

RURAL ELECTRIC CONVENIENCE COOP CO

3973 W STATE RTE 104
PO BOX 19
AUBURN IL 62615

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$5,463** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-200-004-00	Class 0060	Acreage 1.000	Print Date 9/23/2024	2023 Taxes: \$ 339.02		ESTIMATED		2024 Taxes: \$ 349.25
Legal Description 208.8X208.8 50 N SE COR NE1/4 150367.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	2,127	0	3,176	0	5,303		
	2024	2,191	0	3,272	0	5,463		

Land Fair Cash Val: 6,573 Building Fair Cash Val: 9,816 **Non-Farm Value: 16,389**

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
12/30/2008	\$4,187	2008R06456	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

15-12-36-200-004-00

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-300-001-00 812 E 1250 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAYMAN MAX L

Address to send notice if different than shown at left:

812 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$51,577** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
- Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
- Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-300-001-00	Class 0011	Acreage 78.000	Print Date 9/23/2024	2023 Taxes: \$ 2,214.38		ESTIMATED	2024 Taxes: \$ 2,594.06
Legal Description W1/2 SW1/4 EX BEG NW COR W1/2 SW1/4 E243' TO POB E230' S333' W230' N333' TO THE POB 1994R02754 1979R26721 1978R19490 150361.002	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	5,923	9,176	20,239	15,300	50,638	
	2024	5,837	10,097	20,343	15,300	51,577	

15-12-36-300-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

<u>Tax Year</u>	<u>Exemption History</u>	<u>Amount</u>
2023	ELDERLY	5000
	OWNER OCCUPD	6000
	Disabled 70-100% Ve	5000
2024	ELDERLY	5000
	OWNER OCCUPD	6000

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-300-002-00 810 E 1250 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAYMAN MARK

1020 N 750 EAST RD
PALMER IL 62556

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$25,065** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-300-002-00	Class 0011	Acreage 1.500	Print Date 9/23/2024	2023 Taxes: \$ 1,252.82		ESTIMATED		2024 Taxes: \$ 1,602.39
Legal Description BEG NW COR NW1/4 SW1/4 E243.38' S333' E230' N333' W230' TO POB 2004R00048 150361.001	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	6,780	20	11,297	1,500	19,597		
	2024	6,683	22	16,860	1,500	25,065		

15-12-36-300-002-00

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/01/1978	\$21,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-300-004-00 834 E 1250 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

FOOR ROBERT L JR & MARY

Address to send notice if different than shown at left:

834 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$33,261** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-300-004-00	Class 0011	Acreage 16.230	Print Date 9/23/2024	2023 Taxes: \$ 1,418.28		ESTIMATED		2024 Taxes: \$ 1,742.77
Legal Description 16.233AC NW COR NE1/4 SW1/4 150368.000 2004R02839 76-9604	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	4,569	3,752	15,494	4,370	28,185		
	2024	4,500	4,208	20,183	4,370	33,261		

15-12-36-300-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
04/01/2004	\$75,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-300-005-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WAYMAN MAX L

Address to send notice if different than shown at left:

812 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,835** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-300-005-00	Class 0021	Acreage 34.520	Print Date 9/23/2024	2023 Taxes: \$ 228.30		ESTIMATED	2024 Taxes: \$ 245.17
Legal Description BEG NE COR SW1/4 S1781.08 W464.39 NWLY387.99 SWLY 137.90 SELY255.31 150362.000 92-0190 SWLY152.26 SWLY620.14	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	3,571	0	0	3,571	
	2024	0	3,835	0	0	3,835	

15-12-36-300-005-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
03/01/1992	\$19,000		Yes

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-300-006-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

WEMPLE ROBERT C & ELIZABETH L

Address to send notice if different than shown at left:

827 E 1175 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$2,746** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-300-006-00	Class 0021	Acreage 29.210	Print Date 9/23/2024	2023 Taxes: \$ 160.92		ESTIMATED		2024 Taxes: \$ 175.55
Legal Description THAT PART SE1/4 SW1/4 LY S & E OF BEAR CREEK 160363.000 90-04784	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	2,517	0	0	2,517		
	2024	0	2,746	0	0	2,746		

15-12-36-300-006-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
10/22/2012	\$72,500	2012R05834	No
10/22/2012	\$77,500	2012R05835	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-400-001-00 872 E 1250 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCNEELY SCOTT & LAURA

Address to send notice if different than shown at left:

872 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$7,974** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-400-001-00	Class 0021	Acreage 50.460	Print Date 9/23/2024	2023 Taxes: \$ 460.16		ESTIMATED	2024 Taxes: \$ 509.77
Legal Description W1/2 SE1/4 EX BEG NE COR W1/2 SE1/4 S622.69' W398.16' NELY629' E302.29' TO POB & EX BEG NE COR W1/2 SE1/4 S692.69' W698.29' N1969.13' E398.16' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	7,198	0	0	7,198	
	2024	0	7,974	0	0	7,974	

15-12-36-400-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
Date Sold	Sale Price	Doc#	Qualified?
06/21/2013	\$108,489	2013R02687	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-400-001-01 872 E 1250 NORTH RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCNEELY SCOTT W & LAURA H

Address to send notice if different than shown at left:

872 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$45,049** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-400-001-01	Class 0011	Acreage 5.010	Print Date 9/23/2024	2023 Taxes: \$ 1,809.20	ESTIMATED			2024 Taxes: \$ 2,496.37
Legal Description BEG NE COR W1/2 SE1/4 S70' TO POB S622.69' W398.16' NELY629' E302.29' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	12,942	145	18,363	2,850	34,300		
	2024	12,750	166	29,283	2,850	45,049		

15-12-36-400-001-01

****Required****

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Exemption History</u>	<u>Amount</u>
<u>Tax Year</u> 2023 OWNER OCCUPD	6000
<u>Tax Year</u> 2024 OWNER OCCUPD	6000

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/09/2012	\$37,500	2012R05587	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-400-001-02 TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCNEELY SCOTT W & LAURA H

Address to send notice if different than shown at left:

872 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$6,069** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-400-001-02	Class 0021	Acreage 24.530	Print Date 9/23/2024	2023 Taxes: \$ 348.30		ESTIMATED	2024 Taxes: \$ 387.99
Legal Description BEG NE COR W1/2 SE1/4 S692.69' TO POB S1949.05' W698.29' N1969.13' E398.16' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	5,448	0	0	5,448	
	2024	0	6,069	0	0	6,069	

15-12-36-400-001-02

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
11/26/2012	\$61,250	2012R06447	No
11/26/2012	\$71,137	2012R06448	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-400-002-00 TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

BUESINGER TODD J A

Address to send notice if different than shown at left:

643 E 1200 NORTH RD
MORRISONVILLE IL 62546

Four horizontal lines for address input.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$1,946 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-12-36-400-002-00

Required

Complainant's Estimated Correct Assessed Valuations:

Red horizontal line for valuation input.

Exemption History Amount Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.



Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified? (Example: 03/06/2006, \$40,309, 2006R01006, No)

Preliminary Board Decision

Table with columns: No Change, Assessed Value, Market Value, Board Member Initials (Joy, Ed, Ron)

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-400-002-01 1243 N 900 EAST RD TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

MCNEELY SCOTT W & LAURA H

Address to send notice if different than shown at left:

872 E 1250 NORTH RD
TAYLORVILLE IL 62568

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$2,716 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed table for Legal Description with columns for YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, and TOTAL.

15-12-36-400-002-01

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision.

Exemption History Amount
Tax Year

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?.

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-400-002-02 TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

MCNEELY SCOTT W & LAURA H

Address to send notice if different than shown at left:

872 E 1250 NORTH RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$465** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-400-002-02	Class 0021	Acreage 2.549	Print Date 9/23/2024	2023 Taxes: \$ 26.66		ESTIMATED		2024 Taxes: \$ 29.73
Legal Description BEG NW COR SE1/4 E1316.77' TO POB E244.44' S454.75' W244.44' N454.74' TO POB	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL		
	2023	0	417	0	0	417		
	2024	0	465	0	0	465		

15-12-36-400-002-02

****Required****

Complainant's Estimated Correct Assessed Valuations: _____

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
03/06/2006	\$40,309	2006R01006	No
10/29/2012	\$22,500	2012R05949	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-400-002-03 TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

BUESINGER TODD J A

Address to send notice if different than shown at left:

643 E 1200 NORTH RD
MORRISONVILLE IL 62546

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$3,820** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-400-002-03	Class 0021	Acreage 9.300	Print Date 9/23/2024	2023 Taxes: \$ 220.36		ESTIMATED	2024 Taxes: \$ 244.21
Legal Description BEG NW COR SE1/4 E2096.99' TO POB E593.25' S454.76' S205.53' W658.94' N205.61' E65.13' N454.76' TO POB 2006R01601	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	3,447	0	0	3,447	
	2024	0	3,820	0	0	3,820	

15-12-36-400-002-03

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>
10/29/2012	\$22,500	2012R05948	No

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-400-003-00 TAYLORVILLE

Complaint is hereby made against the assessment of real property for the year 2024 assessed in the name of:

HANCOCK JAMES E & RITA C

Address to send notice if different than shown at left:

1228 N 900 EAST RD
TAYLORVILLE IL 62568

Four horizontal lines for address information.

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at \$5,370 based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- Appraisal: Recent appraisal dated
Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
Comparable Sale(s): Include list and any relevant property details
Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Table with columns: Parcel Number, Class, Acreage, Print Date, 2023 Taxes, ESTIMATED 2024 Taxes. Includes a detailed breakdown table for 2023 and 2024 with columns: YEAR, HOMESITE/LOTS, FARM LAND, BUILDINGS, FARM BLDGS, TOTAL.

15-12-36-400-003-00

Required

Complainant's Estimated Correct Assessed Valuations:

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. (Includes an upward arrow icon)

Exemption History Amount
Tax Year

Sales History table with columns: Date Sold, Sale Price, Doc#, Qualified?

Preliminary Board Decision

No Change Assessed Value Market Value Board Member Initials
\$ \$
Joy Ed Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --
Signed: Date / /2024
Email:

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-400-004-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

THOMAS KENNETH R & KAY E

Address to send notice if different than shown at left:

1199 N 900 EAST RD
TAYLORVILLE IL 62568

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$11,085** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:


Parcel Number 15-12-36-400-004-00	Class 0021	Acreage 20.000	Print Date 9/23/2024	2023 Taxes: \$ 650.80		ESTIMATED	2024 Taxes: \$ 708.66
Legal Description S1/2 SE1/4 SE1/4 150370.000 72-310	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	10,180	0	0	10,180	
	2024	0	11,085	0	0	11,085	

15-12-36-400-004-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

<u>Sales History</u>			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ____ / ____ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-700-001-00

Complaint is hereby made against the assessment of real property for the year **2024** assessed in the name of:

ERP MINERAL RESERVES LLC
% KEN BOLYARD

PO BOX 305
MADISON WV 25130

Address to send notice if different than shown at left:

Complainant, who is a taxpayer of Christian County, or the owner or duly authorized agent of the owner of said property, appeals this assessment of said property at **\$10** based on the following:

RESIDENTIAL / COMMERCIAL

Complaint deadline is 30 days after publication. Publication date is 10/09/2024

- ___ Appraisal: Recent appraisal dated _____
- ___ Recent Sale: Include all sale information (sales contract, settlement statement, RESPA statement, etc.)
- ___ Comparable Sale(s): Include list and any relevant property details
- ___ Recent Construction: Include contractor's affidavit or summary of total cost with estimated non-compensated labor (if applicable)
- ___ Contention of Law: Submit legal brief and statutory reference(s) or case law

FARM

- ___ Farmland: Classification- Include acreage classification, soil survey map with soil types, and photographs of use
Productivity- Include acreage classification, soil survey map with soil types, and productivity index ratings
Flooding- Aerial map showing affected area, soil survey map with soil types, and a ten-year history of yield losses attributed to the flooding of the affected acreage (elevator receipts or other documentation)

COMPLAINT DEADLINE IS 11/12/2024

Reason(s) for Change:

Parcel Number 15-12-36-700-001-00	Class 7100	Acreage 640.000	Print Date 9/23/2024	2023 Taxes: \$ 0.00		ESTIMATED	2024 Taxes: \$ 0.00
Legal Description COAL & MINERAL RIGHTS UNDERLY ALL SEC TOTAL 640A MINED OUT 157735.000	YEAR	HOMESITE/LOTS	FARM LAND	BUILDINGS	FARM BLDGS	TOTAL	
	2023	0	0	10	0	10	
	2024	0	0	10	0	10	

15-12-36-700-001-00

****Required****

Complainant's Estimated Correct Assessed Valuations:

Exemption History **Amount**
Tax Year

IMPORTANT: Write what you feel the fair market value for your property is here. Failure to do so may result in a "no change" decision. 

Sales History			
<u>Date Sold</u>	<u>Sale Price</u>	<u>Doc#</u>	<u>Qualified?</u>

Preliminary Board Decision

No Change	Assessed Value	Market Value	Board Member Initials		
_____	\$ _____	\$ _____	_____	_____	_____
			Joy	Ed	Ron

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone#: () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**

CHRISTIAN COUNTY BOARD OF REVIEW REAL ESTATE ASSESSMENT COMPLAINT

15-12-36-700-001-00

Complainant respectfully requests the Board of Review to examine all evidence and facts to find a fair, equitable and uniform valuation of said property assessment.

- Oral Hearing Requested - A Hearing Will Be Scheduled
- Rule On Evidence Provided With Option To Schedule Hearing After Preliminary Decision

Phone# : () --

Signed: _____ Date ___ / ___ /2024

Email: _____

NOTE: **You must attach any evidence that supports your complaint.**