

#### Nevada State Board of Equalization

Petition for DIRECT Appeal by County Assessor or Department of Taxation If you have questions about this form or the appeal process, please call: (775) 684-2160 Email completed form to: <u>stateboard@tax.state.nv.us</u> or Fax (775) 684-2020 Mail: State Board of Equalization, 3850 Arrowhead Dr., Carson City, NV, 89706

#### PROPERTY OWNERS MUST NOT USE THIS FORM. USE FORM 5102SBE.

Please Print or Type:

#### Part A. PETITIONER INFORMATION

NAME OF PETITIONER AND/OR ORGANIZATION :								
NAME OF ASSESSOR OR DEPARTMENT REPRESENTATIVE						TITLE		
MAILING ADDRESS (STREET ADDRESS OR P.O. BOX)					EMAIL ADDRESS:			
CITY		STATE	ZIP CODE	DAYTIME PHONE	ALTERNATE	PHONE	FAX NUMBER	
Part B. PROPERTY OW			ONDENT IN	IFORMATION				
NAME OF PROPERTY OWNER AS IT APPE	ARS ON THE TAX	( ROLL:						
NAME OF RESPONDENT (IF DIFFERENT THAN PROPERTY OWNER LISTED ABOVE):						TITLE		
MAILING ADDRESS OF RESPONDENT (STREET ADDRESS OR P.O. BOX)					EMAIL ADDRESS:			
CITY		STATE	ZIP CODE	DAYTIME PHONE	ALTERNATE	PHONE	FAX NUMBER	
Part C. PROPERTY OWNER ENTITY DESCRIPTION         Check organization type which best describes the Property Owner if an entity and not a natural person.         Sole Proprietorship       Trust         Limited Liability Company (LLC)       General or Limited Partnership       Government or Governmental Agency         Other, please describe:								
3. Does this appeal involve multiple parcels? Yes No List multiple parcels on a separate, letter-sized sheet.								
If yes, enter number of parcels: Multiple parcel list is attached.								
4. Check Property Use Ty	pe: 🗹							
<ul> <li>Vacant Land</li> <li>Residential Property</li> <li>Multi-Family Residential Property</li> <li>Possessory Interest in Real or Person</li> </ul>		<ul> <li>Mobile Home (Not on foundation)</li> <li>Commercial Property</li> <li>Agricultural Property</li> <li>pnal property</li> </ul>			<ul> <li>Mining Property</li> <li>Industrial Property</li> <li>Personal Property</li> </ul>			
5. Check Year and Roll Type of Assessment being appealed: ☑								
2024-2025       Secured Roll         2024-2025       Centrally-assessed Roll			<ul> <li>2023-2024 Unsecured Roll</li> <li>2023-2024 Net Proceeds Roll</li> </ul>			□ 2023-2024 Supplemental Roll		
Other years being appealed: Be prepared to cite the legal authorit	y, if any, that j	permits the	e State Board to c	onsider appeals of taxabl	e value from p	prior years.		

For Clerk Use Only:

#### Part E. VALUE OF PROPERTY

	As established by C Department		Petitioner: What is the value you seek? Write N/A on each line for values which are not being appealed.		
Property Type	Taxable Value	Assessed Value	Taxable Value	Assessed value	
Land					
Buildings					
Personal Property					
Possessory interest in real property					
Centrally-assessed properties					
Net Proceeds of Minerals					
Total					

## Part F. TYPE OF APPEAL

Uneci	which best describes the authority of the State Board to take junstiction to hear the appeal.
	NRS 361.360(3): The value of real or personal property is being appealed, but the appeal could not be heard by a county board of
equali	ization because the real or personal property was placed on the unsecured tax roll after December 15.
	NRS 361.395(1): Request for equalization of neighborhood or market area.
	NRS 361.403: This is an appeal regarding the undervaluation, overvaluation or non-assessment of property by the Nevada Tax Commission
(centra	ally-assessed utility or transportation properties).

NRS 361.769(3)(b): Property escaping taxation.

NRS 362.135: This is an appeal of the certification of Net Proceeds of Minerals Tax by the Department of Taxation.

This is an appeal of the denial of exemption of real or personal property by Department of Taxation

Other reason, please describe.

# Part G. ATTACH A STATEMENT DESCRIBING THE FACTS, REASONS AND STATUTORY BASIS RELIED UPON TO SUPPORT THE CLAIM, PURSUANT TO NAC 361.7012(6).

#### Part H. COUNTY APPEAL INFORMATION

County in which appeal was heard:	County Case Number:	Date Heard by County:	

### VERIFICATION

I verify (or declare) under penalty of perjury under the laws of the State of Nevada that the foregoing and all information hereon, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.

Petitioner Signature

Title

Date