

JAN 11 2017

CONTROL #
WASHOE COUNTY ASSESSOR

APPEAL CASE # 17-0035

Washoe County Board of Equalization

APN 055-021-02

NBC IGDH
APPR PJK

PETITION FOR REVIEW OF TAXABLE VALUATION

Submit this Petition Form no later than 5 p.m. of the date due. Most types of appeals must be filed no later than January 15th. If the appeal involves valuation of property escaping taxation, or a determination that agricultural property has been converted to a higher use, a different due date may apply.

Please Print or Type:

Part A. PROPERTY OWNER/ PETITIONER INFORMATION (Agent's Information to be completed in Part H)

NAME OF PROPERTY OWNER AS IT APPEARS ON THE TAX ROLL: MOUNDHOUSE - ZOOD TRUST						
NAME OF PETITIONER (IF DIFFERENT THAN PROPERTY OWNER LISTED IN PART A): DENNIS HOF					TITLE TRUSTEE	
MAILING ADDRESS OF PETITIONER (STREET ADDRESS OR P.O. BOX) 162 GARNET CIR					EMAIL ADDRESS: dennis.hof@mac.com	
CITY MOUND HOUSE	STATE NV	ZIP CODE 89706	DAYTIME PHONE 775-720-9090	ALTERNATE PHONE	FAX NUMBER 775-246-5753	

Part B. PROPERTY OWNER ENTITY DESCRIPTION

Check organization type which best describes the Property Owner if an entity and not a natural person. Natural persons may skip Part B.

- ☐ Sole Proprietorship
☒ Trust
☐ Limited Liability Company (LLC)
☐ General or Limited Partnership
☐ Corporation
☐ Government or Governmental Agency
☐ Other, please describe:

The organization described above was formed under the laws of the State of

The organization described above is a non-profit organization. ☐ Yes ☐ No

Part C. RELATIONSHIP OF PETITIONER TO PROPERTY OWNER IN PART A

Check box which best describes the relationship of Petitioner to Property Owner: ☒ Additional information may be necessary.

- ☐ Self
☒ Trustee of Trust
☐ Employee of Property Owner
☐ Co-owner, partner, managing member
☐ Officer of Company
☐ Employee or Officer of Management Company
☐ Employee, Officer, or Owner of Lessee of leasehold, possessory interest, or beneficial interest in real property
☐ Other, please describe:

Part D. PROPERTY IDENTIFICATION INFORMATION

1. Enter Physical Address of Property:

ADDRESS 2050	STREET/ROAD JS BAR RANCH RD	CITY (IF APPLICABLE)	COUNTY WASHOE
Purchase Price:		Purchase date:	

2. Enter Applicable Assessor Parcel Number (APN) or Personal Property Account Number from assessment notice or tax bill:

ASSESSOR'S PARCEL NUMBER (APN) 055-021-02	ACCOUNT NUMBER
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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. <input type="checkbox"/>
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4. Check Property Use Type: ☒

<input checked="" type="checkbox"/> Vacant Land <input type="checkbox"/> Residential Property <input type="checkbox"/> Multi-Family Residential Property <input type="checkbox"/> Possessory Interest in Real or Personal property	<input type="checkbox"/> Mobile Home (Not on foundation) <input type="checkbox"/> Commercial Property <input type="checkbox"/> Agricultural Property	<input type="checkbox"/> Mining Property <input type="checkbox"/> Industrial Property <input type="checkbox"/> Personal Property
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5. Check Year and Roll Type of Assessment being appealed: ☒

<input checked="" type="checkbox"/> 2017-2018 Secured Roll	<input type="checkbox"/> 2016-2017 Unsecured Roll	<input type="checkbox"/> 2016-2017 Supplemental Roll
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Part E. VALUE OF PROPERTY

Property Owner: What is the value you seek? Write N/A on each line for values which are not being appealed. See NRS 361.025 for the definition of Full Cash Value.

Property Type	Assessor's Taxable Value	Owner's Opinion of Value
Land	100,000	
Buildings		N/A
Personal Property		N/A
Possessory Interest in real property		N/A
Exempt Value		N/A
Total		

Part F. TYPE OF APPEAL*Check box which best describes the authority of the County Board to take jurisdiction to hear the appeal.*

- ☒ NRS 361.357: The full cash value of my property is less than the computed taxable value of the property.
- ☐ NRS 361.356: My property is assessed at a higher value than another property that has an identical use and a comparable location to my property.
- ☐ NRS 361.355: My property is overvalued because other property within the county is undervalued or not assessed, and I have attached the proof showing the owner, location, description and the taxable value of the undervalued property.
- ☐ NRS 361.155: I request a review of the Assessor's decision to deny my claim for exemption from property taxes.
- ☐ NRS 361A.280: The Assessor has determined my agricultural property has been converted to a higher use and deferred taxes are now due.
- ☐ NRS 361.769: My property has been assessed as property escaping taxation for this year and/or prior years.

Part G. WRITE A STATEMENT DESCRIBING THE FACTS AND/OR REASONS FOR YOUR APPEAL, REQUEST FOR REVIEW, OR COMPLAINT. (ATTACH A SEPARATE PAGE IF MORE ROOM IS NEEDED).PLEASE SEE ATTACHED**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; and that I am either (1) the person who owns or controls taxable property, or possesses in its entirety taxable property, or the lessee or user of a leasehold interest, possessory interest, beneficial interest or beneficial use, pursuant to NRS 361.334; or (2) I am a person employed by the Property Owner or an affiliate of the Property Owner and I am acting within the scope of my employment. If Part H below is completed, I further certify I have authorized each agent named therein to represent the Property Owner as stated and I have the authority to appoint each agent named in Part H.

Petitioner Signature

DENNIS HOF

Print Name of Signatory

Title

TRUSTEE

Date

1/11/2017**Part H. AUTHORIZATION OF AGENT** Complete this section only if an agent, including an attorney, has been appointed to represent the Property Owner/Petitioner in proceedings before the County Board.

I hereby authorize the agent whose name and contact information appears below to file a petition to the County Board of Equalization and to contest the value and/or exemption established for the properties named in Part D(2) of this Petition. I further authorize the agent listed below to receive all notices and decision letters related thereto; and represent the Petitioner in all related hearings and matters including stipulations and withdrawals before the County Board of Equalization. This authorization is limited to the appeal of property valuation for the tax roll and fiscal year named in Part D(5) of this Petition.

List additional authorized agents on a separate sheet as needed, including printed name, contact information, signature, title and date.

Authorized Agent Contact Information:

NAME OF AUTHORIZED AGENT:			TITLE:		
AUTHORIZED AGENT COMPANY, IF APPLICABLE:			EMAIL ADDRESS:		
MAILING ADDRESS OF AUTHORIZED AGENT (STREET ADDRESS OR P.O. BOX)					
CITY	STATE	ZIP CODE	DAYTIME PHONE	ALTERNATE PHONE	FAX NUMBER

Authorized Agent must check each applicable statement and sign below.

- ☐ I hereby accept appointment as the authorized agent of the Property Owner in proceedings before the County Board.
- ☐ 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; and I am the authorized agent with authority to petition the State Board subject to the requirements of NRS 361.362 and the limitations contained in the Agent Authorization Form to be separately submitted.

Authorized Agent Signature

Title

Print Name of Signatory

Date

- ☐ I hereby withdraw my appeal to the County Board of Equalization.

Signature of Owner or Authorized Agent/Attorney

Date

ASSESSOR ATTACHMENT

17-0035

055-021-02

IGDH

Parcel/Roll No 055-021-02

Legal Description FRANKTOWN HILLS UT 1 LT 3

Zoning MDR

Present Use 0 Current Land Use Code 120

Year of Last Reappraisal 2017

Exempt Reason (List Applicable NRS)

Owner of record as of 1/12/2017 MOUNHOUSE-2000 TRUST

ASSESSORS					
TAXABLE VALUE	2017/2018	ASSESSED VALUE		PREVIOUS ASSESSED VALUE	2016/2017
Land	100,000	Land	35,000	Land	87,500
Improvements	-	Improvements	-	Improvements	20,871
Personal Property		Personal Property		Personal Property	
Total	100,000	Total	35,000	Total	108,371
		Exemption Amt	-	Exemption Amt	-

The Offices of Dennis Hof
Moundhouse-2000 Trust

162 Garnet Cir
Mound House, NV 89708
(775) 720-9090
(775) 246-5753 FAX

January 11, 2017

Michele L. Jachimowicz
Washoe County Assessor's Office
Washoe County Board of Equalization
PO Box 11130
Reno, NV 89520

RE: APN 055-021-02 Petition for Review of Taxable Valuation

Dear Michele:

I am requesting a reduction in value for my parcel referenced above.

As you are aware my home was a total loss due to the Little Valley fire in October 2016. As a result of the fire I am faced with removing 323 trees from my land at an estimated cost of \$53,000 as well as the debris removal cost of \$36,000. The damage to my property as a result of the severe erosion due to the fire remains to be seen.

Based on the facts above I am requesting the value of my property be reduced to \$0.

Thank you again for your assistance during this difficult time.

Sincerely,

A handwritten signature in black ink, appearing to read 'Dennis Hof', written over a horizontal line.

Dennis Hof