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APPEAL CASE # 18-0003E17

NOV 03 2017

Washoe County Board of Equalization

APN 077-170-18

WASHOE COUNTY ASSESSOR PETITION FOR REVIEW OF TAXABLE VALUATION

NBC EXEM
APPR LZ

Submit this Petition Form no later than 5 p.m. of the date due. **Most types of appeals must be filed no later than**
If the appeal involves valuation of property escaping taxation, or a determination that agricultural property has been converted to
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: Varian Harris						
NAME OF PETITIONER (IF DIFFERENT THAN PROPERTY OWNER LISTED IN PART A):					TITLE	
MAILING ADDRESS OF PETITIONER (STREET ADDRESS OR P.O. BOX) 5400 Pony Springs Rd					EMAIL ADDRESS: v.carlharris1@gmail.com	
CITY Reno	STATE NV	ZIP CODE 89510	DAYTIME PHONE 775 225 5551		ALTERNATE PHONE ()	FAX NUMBER ()

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 ☐ Corporation
☐ Limited Liability Company (LLC) ☐ General or Limited Partnership ☐ 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	STREET/ROAD	CITY (IF APPLICABLE)	COUNTY
	Pony Springs	Warm Springs	Washoe
Purchase Price: n/a	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) 077-170-18	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 type="checkbox"/> Vacant Land	<input type="checkbox"/> Mobile Home (Not on foundation)	<input type="checkbox"/> Mining Property
<input type="checkbox"/> Residential Property	<input type="checkbox"/> Commercial Property	<input type="checkbox"/> Industrial Property
<input type="checkbox"/> Multi-Family Residential Property	<input type="checkbox"/> Agricultural Property	<input type="checkbox"/> Personal Property
<input type="checkbox"/> Possessory Interest in Real or Personal property		

5. Check Year and Roll Type of Assessment being appealed: ☒

<input type="checkbox"/> 2018-2019 Secured Roll	<input type="checkbox"/> 2017-2018 Reopen	<input type="checkbox"/> 2017-2018 Unsecured/Supplemental	<input checked="" type="checkbox"/> 2017-2018 Exemption Value
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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		
Buildings		
Personal Property		
Possessory Interest in real property		
Exempt Value	n/a	13,775
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).

I was confused on filling out renewal form. I intended to put as much as I could in my real property taxes.

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

Title

Varian Harris
Print Name of Signatory

Date

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

PETITIONER'S EVIDENCE



WASHOE COUNTY ASSESSOR

Michael E. Clark



HARRIS, VARIAN C
APN: 077-170-18

EXEMPTION RENEWAL SELECTION FOR TAX YEAR 2017/2018 (JULY 1, 2017 THROUGH JUNE 30, 2018)

NOTICE: THIS FORM REPLACES THE POSTCARD SENT IN PREVIOUS YEARS. PLEASE COMPLETE THIS FORM & RETURN IT TO THE ASSESSOR'S OFFICE IN THE ENCLOSED ENVELOPE BY JUNE 15, 2017 TO RENEW YOUR EXEMPTION.

HARRIS, VARIAN C
5400 PONY SPRINGS RD
RENO, NV 89510

EXEMPTION NUMBER: 19804
ONLINE RENEWAL PIN: CTC9N4

TO APPLY YOUR EXEMPTION TO REAL PROPERTY, THIS RENEWAL MUST BE RETURNED BY **JUNE 15, 2017**
RENEW YOUR EXEMPTION ONLINE AT www.washoecounty.us/assessor/exemptions

EXEMPTION HOLDER: HARRIS, VARIAN C
EXEMPTION TYPE: Disabled Veteran 100%

ASSESSED VALUE: 26400
*Adjusted for CPI per NRS 361

Please select option(s) below indicating how you would like to apply your exemption for the next fiscal year. If you would like to split your exemption between 2 or more uses, please mark appropriate boxes and complete the amount you need for the DMV in the space provided under the DMV selection.

☒ **DMV (DEPARTMENT OF MOTOR VEHICLES) GOVERNMENT SERVICES TAX:**

YOU CANNOT USE THIS FORM AT THE DMV. Please check the month(s) below that you would like to receive your DMV coupon/voucher. Please select a month that is at least 1 month before your DMV registration is due (for registration dates July 1, 2017 through June 30, 2018). For registration dates due in April, May or June of 2018, select March 2018.

☐ June 2017 ☐ July 2017 ☐ August 2017 ☒ September 2017 ☐ October 2017
☐ November 2017 ☐ December 2017 ☐ January 2018 ☐ February 2018 ☐ March 2018

☐ **SPLITTING EXEMPTION** – Please set aside \$ _____ for my use at the DMV and apply the rest of my exemption to my selections below.

☐ **REAL PROPERTY (REAL ESTATE):** APN/ADDRESS: ~~077-170-18 0 PONY SPRINGS RD~~

☐ **MOBILE/MANUFACTURED HOME:** ACCOUNT #/ADDRESS: _____

☐ **AIRCRAFT:** ACCOUNT #/TAIL #: _____

☐ **BUSINESS PERSONAL PROPERTY:** ACCOUNT NUMBER: _____

☐ **DONATE _____ % OF MY VETERAN EXEMPTION TO THE VETERAN'S HOME FUND IN LIEU OF CLAIMING EXEMPTION ON MY TAXES.** (By selecting this option, the percentage donated will reduce the amount of exemption applied to your property.)

I, the undersigned, hereby declare that I am a bona fide resident of the State of Nevada and that I am still eligible for the above exemption type and have not claimed this exemption in any other county in the State of Nevada.

SIGNED: [Signature]
(MUST be signed by exemption holder or authorized POA or Guardian)

DATE: 05/08/17

SEE REVERSE SIDE FOR INSTRUCTIONS & ADDITIONAL INFORMATION



WASHOE COUNTY ASSESSOR

Michael E. Clark



INSTRUCTIONS & ADDITIONAL INFORMATION FOR COMPLETING YOUR ANNUAL EXEMPTION RENEWAL

You may renew your exemption by completing the reverse side of this form and returning it to our office or you may renew online at www.washoecounty.us/assessor/exemptions using the exemption ID and PIN on the reverse side.

Don't forget to sign your renewal form if you are mailing it back to the Assessor's Office.

RENEWAL OPTIONS:

Department of Motor Vehicles (DMV) Registration Government Services Tax:

You cannot use this form at the DMV. To receive the necessary DMV voucher to use at the time your vehicle registration is due, check the appropriate box(es) for the month(s) that you would like to receive the voucher. We recommend that you check the month that is at least 1 month prior to your vehicle registration due date to allow for sufficient mail time. You will need to submit the exemption voucher to the DMV or use the exemption number on the DMV's website or kiosk when registering your vehicle. **DMV will not refund fees if you neglect to submit your exemption information at the time of registration.** If you need your exemption voucher sooner than indicated you may contact our office at (775)328-2277 or by email at exemptions@washoecounty.us.

Real Property (Real Estate):

To apply the exemption to your real property (real estate) taxes, you must return this form by **June 15, 2017**. Please check the appropriate box and, if it is not preprinted, write the Assessor Parcel Number (APN) and/or the street address of the property in the space provided next to this selection. If you do not want to apply the exemption to the property preprinted in this area, cross through the property printed and write the correct APN and/or street address.

Mobile Home (Manufactured Home):

Please check the appropriate box and, if it is not preprinted, write the Account Number and/or the street address of the property in the space provided next to this selection. If you do not want to apply the exemption to the property preprinted in this area, cross through the property printed and write the correct Account Number and/or street address.

Business Personal Property:

Please check the appropriate box and, if it is not preprinted, write the Account Number and/or the location of the property in the space provided next to the appropriate selection. If you do not want to apply the exemption to the property preprinted in this area, cross through the property printed and write the correct Account Number and/or location.

Aircraft:

Please check the appropriate box and, if it is not preprinted, write the Account Number and/or Tail Number of the property in the space provided next to the appropriate selection. If you do not want to apply the exemption to the property preprinted in this area, cross through the property printed and write the correct Account Number and/or tail number.