

STATEMENT OF APPEAL
OF THE COUNTY ASSESSOR'S ASSESSMENT TO THE
CROOK COUNTY BOARD OF EQUALIZATION

1. Petitioner Name: _____

Mailing Address: _____

Phone Numbers (Daytime) _____ (home) _____

2. Attach a copy of the ASSESSMENT SCHEDULE that you are appealing

3. Parcel Identification Number (P.I.D. #) _____
(From assessment schedule if you fail to provide the Assessment Schedule)

4. LEGAL DESCRIPTION OF REAL PROPERTY:

Township ____ North, Range _____ West 6th PM Crook County, Wyoming

Section ____ Quarter, Quarter(s) _____

Section ____ Quarter, Quarter(s) _____

Section ____ Quarter, Quarter(s) _____

5. Provide a concise statement of the facts, issues and objections which you consider relevant to the assessment of the property. Attach additional pages if necessary.
