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 appear	ling	
3.	Parcel Identification Number (P.I.D. #) (From assessment schedule if you fail to provide the Assessment Schedule)		
4.	LEGAL DESCRIPTION OF REAL PROPERTY:		
	TownshipNorth, RangeWest 6 th PM Crook County, Wy	oming	
	Section Quarter, Quarter(s)		
	Section Quarter, Quarter(s)		
	Section Quarter, Quarter(s)		
5. relev	Provide a concise statement of the facts, issues and objections which vant to the assessment of the property. Attach additional pages if necessary	•	

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6. apply.	Provide references to applicable statutes, rules, orders or legal authority that may
7.	A statement of the relief you desire for each item you are appealing.
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