ORLEANS PARISH BOARD OF REVIEW ASSESSMENT APPEAL FORM BOR 5 BUSINESS PERSONAL PROPERTY

APPEAL NUMBER	ParlD
	Taxbill Number
APPEALLANT INFORMATION (PLEASE PRINT):	
Name:	Home Phone:
Work Phone: Mobile Phone:	
Email Address:	
Complete mailing address (for receipt of notices):	
(No.) (Street Address)	
City: State Zip Code:_	
Taxpayer of Record If Different from Appellant*:	
*Note: If the appellant is someone other than the taxpaye must be filed with the appeal.	r of record, an <u>Authorization Form</u>
LOCATION OF PROPERTY:	
(No.) (Street Address)	
TO BE COMPLETED BY ASSESSOR:	
Tax Bill Number	

INSTRUCTIONS:

- 1. For each property classification for which the assessment is being appealed, provide the following information on the reverse side of this form (page 2):
 - (1) Specific classification (i.e. computers, professional library, office furniture & fixtures);
 - (2) Year(s) of purchase;
 - (3) For each year in which property was purchased, the acquisition cost for that year;
 - (4) Assessor's assessment, and
 - (5) Requested Adjusted Assessment.
- 2. Justify the requested assessment. (The Louisiana Constitution requires that the assessment be 15% of fair market value.)

All information to be submitted must be received with this form. Form LAT 5 must have been filed timely with the Assessor to preserve the right to appeal to the Board of Review.

ParID

Taxbill Number

(1) Property Classification	(2) Year (s) Purchased	(3) Acquisition Cost	(4) Assessor's Assessment	(5) Requested Assessment

Explanation Of Appeal (Please Attach Additional Information As Needed):

I, declare that under the penalties for filing false reports that this return has been examined by me to the best of my knowledge and belief is a true, correct and complete return. If the return is prepared by other than the taxpayer, his declaration is based on all the information relating to the matters required to be reported in the return of which he has knowledge.