

**2025 GRAND RAPIDS ASSESSOR'S REVIEW APPEAL FORM**  
**COMMERCIAL / INDUSTRIAL REAL PROPERTY**

Date Received

Parcel Address: \_\_\_\_\_

Permanent Parcel #: 41 - - - - .

I hereby appeal the: Assessed Value: \$ \_\_\_\_\_ Taxable Value: \$ \_\_\_\_\_

**This form must be received in the Assessor's Office by 5:00 PM February 14, 2025 or postmarked by the deadline.**

**2025 APPEAL DEADLINES:**

Assessor's Review: Written or electronically submitted appeals must be received **in** the Assessor's Office by 5:00 PM February 14, 2025. Mailed appeals must be postmarked by the deadline. **There are no exceptions to this deadline.**

March Board of Review: Taxpayers dissatisfied with the results from Assessor's Review may either send a letter to the Board of Review or call the Assessor's Office to schedule an appointment with the Board. The Board of Review will begin hearing appeals on March 5, 2025. Contact this office no later than March 17, 2025 to schedule an appointment. The final meeting of the Board will be on March 21, 2025.

Michigan Tax Tribunal: Taxpayers dissatisfied with the results from Board of Review must file in writing on or before May 31, 2025.

**INSTRUCTIONS:** Answer all questions as completely as possible. Additional information may be included on a separate sheet, but may not be substituted for a completed appeal form. Copies of appraisals or other supporting material should also be included. Submit a separate appeal for each parcel under appeal (supporting documentation need not be duplicated). If you are filing as an agent, please attach a current letter of authorization from the owner/taxpayer.

1. What do you believe is the current market value of this property? \$ \_\_\_\_\_
  
2. Please explain the reason(s) you feel your assessment is incorrect:  
**IMPORTANT:** *In order for this appeal to be valid, you **MUST** provide the specific arguments behind your contention of the value placed upon this property. (GR Charter, Title IX Section 9)*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
3. Purchase Price: \$ \_\_\_\_\_ Date: \_\_\_\_\_ Terms: \_\_\_\_\_ Broker used? Yes or No  
List any concessions or other considerations included in the sale price along with an estimate of value at that time: \_\_\_\_\_
  
4. What is the current condition of the property? \_\_\_\_\_
5. Please describe any remodeling or improvements made to the property. Include the date and cost of each improvement:  
\_\_\_\_\_
  
6. Select One:  I have reviewed the data on the property record card and found it to be accurate.  
 I have reviewed the data on the property record card and found the following discrepancies: *(please list)*  
\_\_\_\_\_
  
7. Is the property for sale or has it been listed for sale in the past year? Yes or No *(circle one)*  
Asking Price: \$ \_\_\_\_\_ Minimum acceptable price including all selling costs: \$ \_\_\_\_\_  
Does this include any liens or special assessments? Yes or No If Yes, how much? \$ \_\_\_\_\_
  
8. Does this property generate rental income? Yes or No *(circle one)* If Yes, submit an Income/Expense form
  
9. **Has this property been appraised in the past 12 months?** Yes or No *(circle one)* If yes, include a copy of the complete appraisal with this appeal.

**PLEASE COMPLETE REVERSE SIDE**



PARCEL ADDRESS: \_\_\_\_\_ PARCEL NUMBER: 41- - - - .

TAXPAYER's Mailing Address: \_\_\_\_\_ AGENT's Mailing Address (with authorization letter only) \_\_\_\_\_  
Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
Daytime Telephone #: (\_\_\_\_) \_\_\_\_\_ Daytime Telephone #: (\_\_\_\_) \_\_\_\_\_

**\*\*Under penalty of perjury, I declare that to the best of my knowledge and belief this appeal is true, correct and complete.\*\***

**Signature below must match the taxpayer name listed on our records. If you are signing on behalf of the taxpayer, you must include an authorization letter, articles of incorporation, trust paperwork or other supporting document(s) authorizing your signature.**

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Agent or Taxpayer's Signature

- Authorization Letter Attached
- LLC – Articles of Incorporation Attached
- Trust – Trust Documentation Attached

\_\_\_\_\_  
Printed Name

The City Commission of Grand Rapids has adopted **Ordinance No. 2014-77** which makes it a criminal misdemeanor offense to knowingly write, cause to be written, or permit to be written any false, incorrect or inaccurate information on any document, record or form required to be filed with the City Assessor. Furthermore, no person shall knowingly file or cause to be filed with the City Assessor any document, record or form containing any false, incorrect or inaccurate information. The Grand Rapids City Attorney will prosecute such offenses in the 61<sup>st</sup> District Court.

**This form and supporting documentation must be in the Assessor's Office by 5:00 pm, February 14, 2025, or postmarked by the deadline. THERE ARE NO EXCEPTIONS TO THIS DEADLINE.**  
Office of City Assessor  
300 Monroe Ave NW  
Grand Rapids MI 49503  
(616) 456-3081

**DO NOT WRITE BELOW THIS LINE**

- Deny
- Revised AV \_\_\_\_\_
- Revised TV \_\_\_\_\_
- REASON**  Record Card Correction/Adjustment
- Other

\_\_\_\_\_  
\_\_\_\_\_