JEFFERSON COUNTY

OFFICE OF THE

PROPERTY VALUATTION ADMINISTRATOR

REAL ESTATE TAXPAYER'S OPINION OF VALUE

Taxpayer's			
	(Last Name)	(First Name)	(Middle Initial)
Property			
Address			
	(Number	and Street or Rural Route	e)
Parcel ID			
		REAL ESTATE	
Taxpayer's Opinion of Val	ue \$		
Property Value Admin's Assessment Value (Office Use Only)	\$		
COMMENTS:		AFFIDAVIT	
doctors, under the population	ice of porjury that th		ing any accompanying schedules ar
			e and belief is a true, correct, and
complete value; and that a	ıll my taxable propert	y has been listed at its fa	ir cash value.
Sworn and described befo	re me this da	y of	20
(Printed Name of Taxpayer / Representative)			(Title)
(Signature of Taxpayer)			ignature of the PVA or Deputy)
(Signature of Authorized Representative)			(Date of Filing)

Please provide a copy of Driver's License or State ID when submitting this form