

Form 3101  
Exhibit A  
Appeal to Board of Review  
by Property Owner/Taxpayer  
For Real and Personal Property

Name: \_\_\_\_\_ Parish/District: \_\_\_\_\_  
Taxpayer

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Ward: \_\_\_\_\_ Assessment/Tax Bill Number: \_\_\_\_\_ Appeal No. \_\_\_\_\_

(Attach copy of complete appeal submitted to the Board of Review) Board of Review  
Address or Legal Description of Property Being Appealed (Also, please identify building by place of business for  
convenience of appraisal) \_\_\_\_\_

I hereby request the review of the assessment of the above described property pursuant to L.R.S. 47:1992. I  
timely filed my reports (if personal property) as required by law, and I have reviewed my assessment with my assessor.

The assessor has determined Fair Market Value of this property at:

Land \$ \_\_\_\_\_ Improvement \$ \_\_\_\_\_ \* Personal Property \$ \_\_\_\_\_  
Total \$ \_\_\_\_\_

I am requesting that the Fair Market Value of this property be fixed at:

Land \$ \_\_\_\_\_ Improvement \$ \_\_\_\_\_ \* Personal Property \$ \_\_\_\_\_  
Total \$ \_\_\_\_\_

\* If you are not appealing personal property, leave this section blank.

I understand that property is assessed at a percentage of fair market value which means the price for the  
property which would be agreed upon between a willing and informed buyer and a willing and informed seller under  
usual and ordinary circumstances, the highest price the property would bring on the open market if exposed for sale for  
a reasonable time. I understand that I must provide the Board of Review with evidence of fair market value to support  
my claim.

Please notify me of the date, place and time of my appeal at the address shown below.

NOTE: If property owner/taxpayer disputes the Board of Review's decision, property owner/taxpayer may appeal to the La. Tax Commission by completing and submitting Appeal Form 3103.A to the LTC within 10 business days after certified mail delivery to the appealing taxpayer or assessor of the BOR's written determination. For further information, call the LTC at (225) 925-7830

\_\_\_\_\_  
Property Owner/Taxpayer:

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

Telephone No.: \_\_\_\_\_

Email Address: \_\_\_\_\_