

Columbia County Assessor
REQUEST FOR PROPERTY VALUE REVIEW

For Tax Year: _____

Initiated by: _____

Sections 1 and 2 to be completed by Owner/Taxpayer

☐ Internal Review Request

SECTION 1 PROPERTY IDENTIFICATION AND CONTACT INFORMATION		
Tax Code and Account No.	Map and Tax Lot	Situs Address
Owner/Taxpayer Name	Daytime Phone No.	Email

SECTION 2 REASON FOR PROPERTY VALUE REVIEW
Owner/Taxpayer's Estimate of Real Market Value (required): \$
Describe in detail the reason you believe your real market value is incorrect. Be sure to include any evidence to support your value estimate.
Owner/Taxpayer's Signature: _____ Date: _____

Sections 3 and 4 to be completed by Assessor's Office Personnel

SECTION 3 APPRAISER'S FINDINGS		SECTION 4 VALUE DECISION	
Review Appraiser: _____	Date: _____		No Changes Recommended
Appraiser's Explanation			RMV/M5 Value Change
			Exception Value Change
		RMV/M5 Value	
			Current Revised
		Land	
		Imps	
		Total	
		Exception Value	
			Current Revised
		Total	
		Assessed Value	
			Current Revised
		Land	
		Imps	
		Total	
<input type="checkbox"/> Current Year Entered in ORCATS	Date: _____ Initials: _____		
<input type="checkbox"/> Future Year Entered in ORCATS	Date: _____ Initials: _____		

Return form to: **Columbia County Assessor, 230 Strand Street, Saint Helens, OR 97051**