<u>Instructions for filing:</u>

The Taxpayer should fill out this form to appeal their taxes. The three pages are self-explanatory and easy to use. This new electronic fillable appeal form is on the Montana Tax Appeal Board website, www.mtab.mt.gov.

PAGE ONE

- The upper right hand corner of page 1 is the information box for the county's use.
- The third paragraph with a chart shows the requirements for the next steps of the appeal when filing with or without the AB-26 from the Department of Revenue.
- It is important to note that the taxpayer must pay taxes under protest or they
 will not receive a refund.
- If DOR is not allowed to inspect the property then the taxpayer must obtain an independent appraisal otherwise the County Tax Appeal Board will not be able to make any changes to DOR's value.
- The next section should be filled out legibly for all future correspondence.

PAGE TWO

- Give the addresses and property description(s) along with the values of land and building values or improvements by the taxpayer and the DOR. The bordered box for the CTAB values shows here.
- In the lower portion of page 2; the taxpayer should explain what is wrong with the DOR's value and what they would like to have corrected by the appeal.

PAGE THREE

- Provide the name of representative (if any) and contact information. The middle of the page explains what the taxpayer will provide for the county and how the process continues. The boxed in section on this page is for the CTAB Chairman to record the decision and date of the decision.
- The remainder of the form gives information about how to appeal to the Montana Tax Appeal Board.

APPEAL TO THE COUNTY APPEAL TAX BOARD

MTAB-401

Complete this document to appeal a property tax classification or assessment set by the Montana Department of Revenue (DOR). This appeal must be filed with the County Clerk and Recorder of the county where the property is located. This appeal will be heard by that county's Tax Appeal Board (CTAB). The County Tax Appeal Board is not part of the Department of Revenue.

FOR COUNTY APPEAL TAX BOARD USE			
Docket Number:			
Date Filed:			
Received by:			

Only one appeal may be made in each two-year appraisal cycle. The date your appeal is due depends on whether you went through the AB-26 informal review process with DOR.

The county Clerk and Recorder must receive your appeal within 30 days from the date on the DOR's notice of tax classification or assessment. OR If you went through the AB-26 process. The county Clerk and Recorder must receive your appeal within 30 days from the date on the final AB-26 decision sent by Montana Dept. of Revenue.

If your appeal is received late it will not be considered. If your property taxes are due before the appeal is resolved, you must pay them under protest if you want them refunded to you.

If you refuse to allow DOR to inspect your property for appraisal you must submit an appraisal conducted by a licensed appraiser who is in good standing and certified in Montana. If you do not, the county and state tax appeal boards cannot revise your valuation.

Name				
Taxpayer Nar	ne			
Property Cou	nty			
Address				
City		State	Zip	
Email		Phone		

Was an AB-26 Form filed with the Dept. of Revenue?				
Select One:	O No	○ Yes	Decision Date:	

APPEAL TO THE COUNTY APPEAL TAX BOARD

MTAB-401

Legal Description of	f Property:				
Street Address			No. of Acre	es	
Lot(s)			Section		
Block(s)			Township		
Addition / Subdiv.			Range		
City / Town			GEOCode		
			I		
	Dept. of Revenue Valuation	Taxpayer R Valua		CTAB Valuation For CTAB use only.	
Land				v	
Buildings & Improvements					
This section is your opportunity to describe what you think was incorrect about DOR's classification and assessment and to describe what the Board should do to correct it. What was incorrect about DOR's classification or assessment? (Ex: A similar house in my neighborhood sold for less.)					
What are you asking for to correct the problem? (Ex: My home should be valued at \$75,000.)					
Date		$- \left {\text{Taxpav}} \right $	er Signature		

APPEAL TO THE COUNTY APPEAL TAX BOARD

MTAB-401

Optional: 31	rd Party Representa	ation: List below.	
I hereby autho	rize		to represent me in this appeal.
Address			
Email		Phone	
Date		Taxpayer Si	ignature
Finally, make	e two copies of this do	cument and:	
• Send t	he original AND one o	copy to the County Cler	k and Recorder.
• Keep o	one copy for your reco	ords.	
	x Appeal Board will con-		ng with you and the Department of ovide you with a decision by mail
The follow	ing section is for th	e County Tax Appeal	Board to write its decision.
The above ap	oplication is:	Granted / De	enied / Granted in Part
For the follo	wing reasons:		
Date:	Chair Signature	- & County	

You may appeal this County Tax Appeal Board decision to the Montana Tax Appeal Board. To do so, complete and submit an Appeal to the Montana Tax Appeal Board (form MTAB-801), available at www.mtab.mt.gov.

The Montana Tax Appeal Board must receive your appeal within 30 days from when you received the County Tax Appeal Board decision or your appeal will not be accepted.