Bismarck

Finance Department

DATE: January 6, 2020

FROM: Dmitriy Chernyak, Finance Director DAC 01/06/20

ITEM: Application for Abatement

REQUEST

Please schedule the attached application for abatement on the agenda for City Commission consideration.

Applications for Abatement for 2019- Disabled Veteran Credit
Property Owner- Paul Uskevicz Jr
Property Address- 524 N 19th St / 0050-047-010

Please place this item on the 1/14/2020 City Commission meeting agenda.

BACKGROUND INFORMATION

The above property applicant has met all the requirements set forth in the N.D.C.C 57-02-08(20) to apply for the Disabled Veteran Credit.

RECOMMENDED CITY COMMISSION ACTION

The Assessing Division recommends approval of the application for abatement as presented.

STAFF CONTACT INFORMATION

Allison Jensen
ajensen@bismarcknd.gov
355-1630

Application For Abatement Or Refund Of Taxes

North Dakota Century Code § 57-23-04

File with the County Auditor on or before November 1 of the year following the year in which the tax becomes delinquent.

State of North Dakota **Assessment District** #1

County of BURLEIGH **Property I.D. No.** 0050-047-010

Name PAUL USKEVICZ JR **Telephone No.**

Address 524 N 19TH ST. BISMARCK

Legal description of the property involved in this application:

FLANNERY & WETHERBY
Block: 47
LOTS 5-6

Total true and full value of the property described above for the year 2019 **is:**

Land $ 38,000
Improvements $ 152,800
Total $ 190,800 (1)

Total true and full value of the property described above for the year 2019 **should be:**

Land $ 38,000
Improvements $ 152,800
Total Adj. $ 155,800 (2)

The difference of $ 35,000 **true and full value between (1) and (2) above is due to the following reason(s):**

- ☐ 1. Agricultural property true and full value exceeds its agricultural value defined in N.D.C.C. § 57-02-27.2
- ☐ 2. Residential or commercial property's true and full value exceeds the market value
- ☐ 3. Error in property description, entering the description, or extending the tax
- ☐ 4. Nonexisting improvement assessed
- ☐ 5. Complainant or property is exempt from taxation. Attach a copy of Application for Property Tax Exemption.
- ☐ 6. Duplicate assessment
- ☐ 7. Property improvement was destroyed or damaged by fire, flood, tornado, or other natural disaster (see N.D.C.C. § 57-23-04(1)(g))
- ☐ 8. Error in noting payment of taxes, taxes erroneously paid
- ☒ 9. Property qualifies for Homestead Credit (N.D.C.C. § 57-02-08.1) or Disabled Veterans Credit (N.D.C.C. § 57-02-08.8). Attach a copy of the application.
- ☐ 10. Other (explain) 70% Dis / Exempt 4 months

The following facts relate to the market value of the residential or commercial property described above. For agricultural property, go directly to question #5.

1. Purchase price of property: $_____ Date of purchase: _____
   Terms: Cash _____ Contract _____ Trade _____ Other (explain) _____
   Was there personal property involved in the purchase price? _____ (yes/no) Estimated value: $_____
2. Has the property been offered for sale on the open market? _____ (yes/no). If yes, how long? _____
   Asking price: $_____ Terms of sale: _____
3. The property was independently appraised: _____ (yes/no) Purpose of appraisal: _____
   _____ Market value estimate: $_____
   Appraisal was made by whom? _____
4. The applicant's estimate of market value of the property involved in this application is $_____
5. The estimated agricultural productive value of this property is excessive because of the following condition(s): _____

Applicant asks that the disabled veteran credit be approved as presented.

By filing this application, I consent to an inspection of the above-described property by an authorized assessment official for the purpose of making an appraisal of the property. I understand the official will give me reasonable notification of the inspection. See N.D.C.C. § 57-23-05.1.

I declare under the penalties of N.D.C.C. § 12.1-11-02, which provides for a Class A misdemeanor for making a false statement in a governmental matter, that this application is, to the best of my knowledge and belief, a true and correct application.

Signature of Preparer (if other than applicant) Date Signature of Applicant 1-3-2020 Date

24775
(2-2016)

Recommendation of the Governing Body of the City or Township

Recommendation of the governing board of _____

On _____, _____, the governing board of this municipality, after examination of this application and the facts, passed a resolution recommending to the Board of County Commissioners that the application be _____

_____

_____

_____

Dated this _____ day of _____, _____.

_____
City Auditor or Township Clerk

Action by the Board of County Commissioners

Application was _____ by action of _____ County Board of Commissioners.
Approved/Rejected

Based upon an examination of the facts and the provisions of North Dakota Century Code § 57-23-04, we approve this application. The taxable valuation is reduced from $ _____ to $ _____ and the taxes are reduced accordingly. The taxes, if paid, will be refunded to the extent of $ _____. The Board accepts $ _____ in full settlement of taxes for the tax year _____.

We reject this application in whole or in part for the following reason(s). Written explanation of the rationale for the decision must be attached. _____

_____

_____

_____

Dated _____, _____

_____ _____
County Auditor Chairperson

Certification of County Auditor

I certify that the Board of County Commissioners took the action stated above and the records of my office and the office of the County Treasurer show the following facts as to the assessment and the payment of taxes on the property described in this application.

Year	Taxable Value	Tax	Date Paid (if paid)	Payment Made Under Written Protest?
				yes/no

I further certify that the taxable valuation and the taxes ordered abated or refunded by the Board of County Commissioner are as follows:

Year	Reduction in Taxable Valuation	Reduction in Taxes

_____ _____
County Auditor Date

Application For Abatement Or Refund Of Taxes

Name of Applicant Paul Uskevicz

County Auditor's File No. 20-001

Date Application Was Filed With The County Auditor 1/3/20

Date County Auditor Mailed Application to Township Clerk or City Auditor _____ (must be within five business days of filing date)

Allan Outmeier