

Objection to Real Property Assessment

To file an appeal on your property assessment, you must provide the Board of Review (BOR) clerk written or oral notice of your intent, under state law (sec. 70.47(7)(a), Wis. Stats.). You must also complete this entire form and submit it to your municipal clerk. To review the best evidence of property value, see the Wisconsin Department Revenue's *Property Assessment Appeal Guide for Wisconsin Real Property Owners*.

Complete all sections:

Section 1: Property Owner / Agent Information			* If agent, submit written authorization (Form PA-105) with this form		
Property owner name (<i>on changed assessment notice</i>) CBDC 2022 LLC			Agent (<i>if applicable</i>) Gary Kohlenberg		
Owner mailing address 750 3RD ST N STE A			Agent mailing address 345 River Bluff Circle		
City LA CROSSE	State WI	Zip 54601-6298	City Oconomowoc	State WI	Zip 53066-2772
Owner phone	Email		Agent phone (262) 569-1800	Email gary@kohlenberg.net	

Section 2: Assessment Information and Opinion of Value		
Property Address 601 7TH STREET N		Legal description or parcel no. (<i>on changed assessment notice</i>) 29423
City CITY OF LACROSSE	State WI	Zip
Total Assessment shown on notice – Total \$2,074,100.00		Your opinion of assessed value – Total \$741,100.00


If this property contains non-market value class acreage, provide your opinion of the taxable value breakdown:

Statutory Class	Acres	\$ Per Acre	Full Taxable Value
Residential total market value			
Commercial total market value			
Agricultural classification: # of tillable acres		@ \$ acre use value	
# of pasture acres		@ \$ acre use value	
# of specialty acres		@ \$ acre use value	
Undeveloped classification # of acres		@ \$ acre @ 50% of market value	
Agricultural forest classification # of acres		@ \$ acre @ 50% of market value	
Forest classification # of acres		@ \$ acre @ market value	
Class 7 "Other" total market value		market value	
Managed forest land acres		@ \$ acre @ 50% of market value	
Managed forest land acres		@ \$ acre @ market value	

Section 3: Reason for Objection and Basis of Estimate	
Reason(s) for your objection: (<i>Attach additional sheets if needed</i>) Equalized value exceeds Fair Market Value	Basis for your opinion of assessed value: (<i>Attach additional sheets if needed</i>) Supporting documentation to follow under separate cover

Section 4: Other Property Information	
<p>A. Within the last 10 years, did you acquire the property?..... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, provide acquisition price \$ _____ Date _____ <input checked="" type="checkbox"/> Purchase <input type="checkbox"/> Trade <input type="checkbox"/> Gift <input type="checkbox"/> Inheritance</p> <p>B. Within the last 10 years, did you change this property (ex: remodel, addition)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, describe: All changes on file with the municipality as building permits. Date of _____ Cost of _____ Does this cost include the value of all labor (including your own)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No changes (on file with municipality) _____ changes (on file with municipality) _____</p> <p>C. Within the last five years, was this property listed/offered for sale? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, how long was the property listed (<i>provide dates</i>) _____ to _____ (mm-dd-yyyy) (mm-dd-yyyy) Asking price \$ _____ List all offers received _____</p> <p>D. Within the last five years was this property appraised? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide: Date _____ Value _____ Purpose of appraisal _____ If this property had more than one appraisal, provide the requested information for each appraisal. _____</p> <p>E.</p>	

Section 5: BOR Hearing Information	
<p>A. If you are requesting that a BOR member(s) be removed from your hearing, provide the name(s): Note: This does not apply in first or second class cities.</p> <p>B. Provide a reasonable estimate of the amount of time you need at the hearing: 20 minutes.</p>	

Property owner or Agent signature 	Gary Kohlenberg - Agent	Date (mm-dd-yyyy) 5/13/2023
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Agent Authorization for Property Assessment Appeals

If an agent is representing the property owner or municipality, the property owner or municipality must provide prior written authorization for the agent to represent the company or municipality when contacting the reviewing authority.

Section 1: Property Owner and Property Information

Company / property owner name , CBDC 2022 LLC			Taxation District <input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>(Check one)</i>		County
Mailing address 750 3RD ST N STE A			Enter municipality CITY OF LA CROSSE		
City LA CROSSE	State WI	Zip 54601-6298	City	State WI	Zip
Parcel number 29423	Phone ()	Email		Fax ()	

Section 2: Authorized Agent Information

Name / title Gary Kohlenberg			Company name Kohlenberg Consulting LLC		
Mailing address 345 River Bluff Circle			Phone (262) 569-1800	Fax (888) 308-3919	
City Oconomowoc	State WI	Zip 53066	Email gary@kohlenberg.net		

Section 3: Agent Authorization

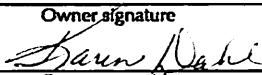
<p>Agent Authorized for: (check all that apply)</p> <p><input type="checkbox"/> Manufacturing property assessment appeals (BOA)</p> <p><input type="checkbox"/> Access to manufacturing assessment system (MAS)</p> <p><input checked="" type="checkbox"/> Wisconsin Department of Revenue 70.85 appeals</p> <p><input checked="" type="checkbox"/> Municipal Board of Review</p> <p><input checked="" type="checkbox"/> Other <u>Communicate with Assessor</u></p> <p>Authorization expires: <u>12 - 31 - 2023</u> <i>(mm - dd - yyyy)</i></p>	<p style="text-align: center;">Enter Tax Years of Authorization</p> <p>_____</p> <p style="text-align: center;">2023</p> <p>_____</p> <p style="text-align: center;">2023</p> <p>_____</p> <p style="text-align: center;">2023</p>
<p>Send notices and other written communications to: (check one or both) <input checked="" type="checkbox"/> Authorized Agent <input checked="" type="checkbox"/> Property Owner</p>	

Section 4: Agreement/Acceptance

I understand, agree and accept:

- The assessor's office may divulge any information it may have on file concerning this property
- My agent has the authority and my permission to accept a subpoena concerning this property on my behalf
- I will provide all information I have that will assist in the discussion and resolution of any assessment appeal of this property
- Signing this document does not relieve me of personal responsibility for timely reporting changes to my property and paying taxes, or penalties for failure to do so, as provided under Wisconsin tax law
- A photocopy and/or faxed copy of this completed form has the same authority as a signed original
- If signed by a corporate officer, partner, or fiduciary on behalf of the owner, I certify that I have the power to execute this Agent Authorization form

Section 5: Owner Grants Authorization

Owner Sign Here	Owner name <i>(please print)</i>	Karen Dahl	
	Owner signature		
	Company or title	CBDC 2022 LLC	
			Date <i>(mm-dd-yyyy)</i> May 10, 2023

Notice of Intent to File Objection with Board of Review

I, Gary Kohlenberg of Kohlenberg Consulting L.L.C. DBA PropertyTaxBill.com as the agent of the property owner CBDC 2022 LLC, hereby give notice of intent to file an objection on the assessment for the following property: Property Tax ID# 29423 601 7TH STREET N for the 2023 Assessment Year in the municipality of CITY OF LACROSSE. Valuation assigned by Assessor is \$2,074,100.00.

THIS NOTICE OF INTENT IS BEING FILED at least 48 hours before the Board's first scheduled meeting.



Gary Kohlenberg

Saturday, May 13, 2023

Gary Kohlenberg
Kohlenberg Consulting L.L.C. /PropertyTaxBill.com

PropertyTaxBill.com

345 River Bluff Circle • Oconomowoc, WI 53066-3480

phone (262) 569-1800 • fax (888) 308-3919
email gary@propertytaxbill.com • www.propertytaxbill.com

Saturday, May 13, 2023

Attn: Municipal Clerk

Dear Municipal Clerk,

Please acknowledge in writing receipt of the attached Notice of Intent to File and Objection Form For Real Property Assessment regarding TAX ID# 29423 located at 601 7TH STREET N in CITY OF LACROSSE. Please acknowledge via fax (888) 308-3919 or email gary@kohlenberg.net with the date and time for my appointment before the Board of Review. Thank you,

Sincerely,

A handwritten signature in black ink, appearing to read 'Gary Kohlenberg', with a stylized, cursive script.

Gary Kohlenberg