



STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

GRETCHEN WHITMER
GOVERNOR

ORLENE HAWKS
DIRECTOR

_____,
Petitioner,

MICHIGAN TAX TRIBUNAL

v

MOAHR Docket No.

_____,
Respondent.

ENTIRE TRIBUNAL SPECIAL ASSESSMENT ANSWER

1. ___ Admit ___ Deny. If denied, state the parcel number identified on the Entire Tribunal Special Assessment Tax Petition: _____
2. ___ Admit ___ Deny. If denied, list the classification of the parcel number identified on the Petition _____

3. ___ Admit ___ Deny. If denied, indicate what the special assessment was levied for _____

4. ___ Admit ___ Deny. If denied, please indicate the proper jurisdiction (if known) _____
5. ___ Admit ___ Deny. If denied, please explain _____

6. ___ Admit ___ Deny. If denied, please indicate the date of the hearing held to confirm the special assessment _____

7. ___ Admit ___ Deny ___ Neither Admit Nor Deny. If denied, list the separate facts upon which Respondent relies in support of the denial (attach additional page if necessary):

8. ___ Admit ___ Deny. If denied, please indicate the number of years covered by the special assessment _____

9. ___ Admit ___ Deny. If denied, please indicate the total amount levied against the subject parcel _____

10. ___ Admit ___ Deny ___ Neither Admit Nor Deny. If denied, list the separate facts upon which Respondent relies in support of the denial (attach additional page if necessary):

11. ___ Admit ___ Deny ___ Neither Admit Nor Deny. If denied, list the separate facts upon which Respondent relies in support of the denial (attach additional page if necessary): _____

12. ___ Admit ___ Deny ___ Neither Admit Nor Deny. If denied, list the separate facts upon which Respondent relies in support of the denial (attach additional page if necessary):

13. ___ Admit ___ Deny ___ Neither Admit Nor Deny. If denied, list the separate facts upon which Respondent relies in support of the denial (attach additional page if necessary):

14. List any separate and specific facts upon which Respondent relies to support every ground on which Respondent relies and also has the burden of proof (attach additional page if necessary):

15. List affirmative defenses and the separate and specific facts upon which Respondent relies in support of those affirmative defenses (attach additional page if necessary):

Signature of Respondent's Authorized Representative, if none, Respondent:

Email Address: _____

Mailing Address:

Telephone Number: _____

Date: _____

