

**Notice of Property Incorrectly Reported or Omitted
from the Assessment Roll Filed by a Person other than
the Owner, Assessor or Equalization Director**

This form is issued under authority of Section 211.154, MCL.

OFFICE USE ONLY

File Number

INFORMATION FROM PERSON GIVING NOTICE (must be typed or printed legibly)

PROPERTY OWNER (if known)		DESCRIPTION OF PROPERTY OMITTED OR INCORRECTLY REPORTED	
Name of Property Owner(s)		Describe property in detail, and attach additional sheets if necessary.	
Owner's Address (No. and Street, City, State and ZIP Code)			
Property Location (Complete address, Parcel No., or (legal) description of place where incorrectly reported or omitted property is located.)			
		NAME & ADDRESS OF PERSON GIVING NOTICE	
		Name	
		Address (No. and Street, City, State and ZIP Code)	
		Daytime Phone Number	
		E-mail Address	
SIGNATURE AND CERTIFICATION OF PERSON GIVING NOTICE			
<i>I certify that the above information is correct to the best of my knowledge and belief.</i>			
Signature		Date	

PROPERTY AND ASSESSMENT ROLL INFORMATION (Completed by State Tax Commission)

County Where Property is Located		Name of Assessing Unit (indicate City or Township)		Village Name (if applicable)	
School District			Property Classification		
Parcel Code (or enter property description)					
PERSONAL PROPERTY NOTICES ONLY: Did the owner of the property complete and deliver a Form 632 (L-4175), Personal Property Statement, for each year that this notice covers, that was: <input type="checkbox"/> Timely Filed? (Accepted as filed and used in determining the assessment that was confirmed by the Board of Review?) <input type="checkbox"/> Estimated/Not Filed? If estimated or not filed, indicate the year(s): _____					
		ASSESSED VALUE		TAXABLE VALUE	
Year(s) for Which Notice was Given	Assessed Value on Assessment Roll	Requested Assessed Value	Taxable Value on Assessment Roll	Requested Taxable Value	
2026					
2025					
2024					
Signature of Chairperson/Executive Director, Michigan State Tax Commission				Date	
Michigan State Tax Commission Findings (for STC use only):					

Parcel Code from Page 1

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ASSESSOR'S CONCURRENCE OR DISAGREEMENT WITH THIS REQUEST

This section must be completed by the assessor.

- ☐ **I AGREE** with this request for corrected Assessed Value and/or Taxable Value.
- ☐ **I DO NOT AGREE** with this request for corrected Assessed Value and/or Taxable Value. (The assessor who checks this box must submit to the State Tax Commission an explanation below of the reason for not concurring.)

Assessor's Explanation for Not Concurring:

Assessor Signature

Date

Assessor Name

Title

Address (Number, Street, City, State and ZIP Code)

Telephone Number

E-mail Address

OWNER'S CONCURRENCE OR DISAGREEMENT WITH THIS REQUEST

This section must be completed by the property owner or agent.

- ☐ **I AGREE** with this request for corrected Assessed Value and/or Taxable Value.
- ☐ **I DO NOT AGREE** with this request for corrected Assessed Value and/or Taxable Value. (The owner who checks this box must submit to the State Tax Commission an explanation below for not concurring with this request.)

Owner's Explanation for Not Concurring:

Did the property covered by this notice change ownership during the time period starting with the earliest year for which a change is being requested, up to the present?

☐ Yes ☐ No If Yes, give date: _____

Property Owner or Agent Signature

Date

Telephone Number

E-mail Address

RETURN THE COMPLETED AND SIGNED FORM TO:

Michigan Department of Treasury
State Tax Commission
PO Box 30471
Lansing MI 48909

STC Date Stamp

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