

**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)**

<b>PROPERTY OWNER (if known)</b>		<b>DESCRIPTION OF PROPERTY OMITTED OR INCORRECTLY REPORTED</b>
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)		
<b>Property Location</b> (Complete address, Parcel No., or (legal) description of place where incorrectly reported or omitted property is located.)		<b>NAME &amp; ADDRESS OF PERSON GIVING NOTICE</b>
		Name
		Address (No. and Street, City, State and ZIP Code)
		Daytime Phone Number
		E-mail Address
<b>SIGNATURE AND CERTIFICATION OF PERSON GIVING NOTICE</b>		
<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:

Timely Filed? (Accepted as filed and used in determining the assessment that was confirmed by the Board of Review?)  
 Estimated/Not Filed? If estimated or not filed, indicate the year(s):

	<b>ASSESSED VALUE</b>		<b>TAXABLE VALUE</b>	
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):

## 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**