



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
MICHIGAN OFFICE OF ADMINISTRATIVE HEARINGS AND RULES
SUZANNE SONNEBORN
EXECUTIVE DIRECTOR

MARLON I. BROWN, DPA
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: _____