

Request for Information on Property Assessed Valuation

_____ Date

Joshua Wilson
Washoe County Assessor
PO Box 11130
Reno, NV 89520-0027

Dear Mr. Wilson,

Re: APN: _____ Physical Address: _____

I am making a formal request for all information pertaining to the assessment of the above-referenced parcel, including without limitation, the following:

- All comparable sales used to appraise the land value and the total property value
- Methods used in the appraisal to determine the stratum of the parcel
- If mass appraisal methods were used, all information pertaining to the process of stratification to determine the stratum of the parcel
- All comparable sales and the process applied to determine the “base lot” value
- All elements of comparison used to make adjustments, and the verifiable data used to support them, as well as all information pertaining to how quantitative values of adjustments were determined and applied, pursuant to NAC 361.118(1)(a)
- If a view influence was considered in the assessment, all information pertaining to:
 - The method used to determine and/or evaluate the subject property’s view
 - A comprehensive written analysis of the view determination and any adjustments made, pursuant to NAC 361.118(1)(f)(2), (3) and (4)
- If sales of land which were vacant at the time of sale were insufficient, please provide any alternative methods used to determine residual land sales pursuant to NAC 361.119(1)
- If the “allocation” method was used please provide all information showing that the properties in the area are substantially similar pursuant to NAC 361.119(1)(e)
- If sales of improved property were used, please provide all sales data and all information pertaining to the removal of improvement value pursuant to NAC 361.119(2)(a), including information as to how the values for the components removed were derived
- All information as to how the taxable value of the improvements was determined

Thank you for your cooperation, consideration and compliance with the law: NRS 361.227(8).

Sincerely,

Signature

Print Name: _____ Contact Phone #: _____

Mailing Address: _____

City / State / Zip: _____