



9. Provide Petitioner's contention or belief of the true cash ( fair market) value and taxable value for each parcel, for each tax year being appealed			
Parcel Number	Tax Year	True Cash (Fair Market) Value Contention	Taxable Value Contention

10. Explain the basis of your appeal.

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11. Does the property have a principal residence exemption of at least 50% for the tax year(s) at issue?  
 \_\_\_ Yes: Petitioner is **not required** to pay a fee for the filing of this appeal.  
 \_\_\_ No: Petitioner is **required** to pay a fee for the filing of the appeal. (See Fee Schedule.)  
**Failure to remit a required fee** with this Form may result in **dismissal**. **Amount Paid:** \_\_\_\_\_

12.  
 If **not** using an agent or attorney, Petitioner is required to sign: \_\_\_\_\_  
 If using an agent or attorney, only agent or attorney is required to sign: \_\_\_\_\_

PLEASE RETURN THE ORIGINAL AND ONE COPY OF THIS COMPLETED FORM WITH TWO COPIES OF ANY ATTACHMENTS to: Michigan Tax Tribunal, PO Box 30232, Lansing, MI 48909.  
**Keep a copy of the Form and any original attachments for your records.**  
**The Department of Labor & Economic Growth will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability or political beliefs. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.**

For further information, please contact the Tribunal at:  
 PH: (517) 373-3003      Web Site: [www.Michigan.gov/taxtribunal](http://www.Michigan.gov/taxtribunal)      E-mail: [taxtrib@Michigan.gov](mailto:taxtrib@Michigan.gov)

TT262 Revised 01/05 1973 PA 186, As Amended