

# Stipulation of Assessment(s) by the Parties

Date: \_\_\_\_\_

Appellant(s): \_\_\_\_\_

Docket Number(s): \_\_\_\_\_

PIN(s): \_\_\_\_\_

**Stipulated Assessment:**

**Land, Improvement, and Total** assessments **must** be completed for **each** parcel. Multiple parcels must be completed on page 2 or on multiple pages and the **aggregate figure indicated below**.

Docket	PIN	Land	Improvement	Total
<b>TOTAL</b>				

**ACCEPTED:**

The undersigned have reviewed the file in the above-captioned matter and find that the assessments should be adjusted. The parties further agree that the **"Stipulated Assessment(s)"** should be applied in the Board of Review's decision.

\_\_\_\_\_  
Acceptance for Appellant/Attorney

\_\_\_\_\_  
Acceptance for Board of Review

\_\_\_\_\_  
Acceptance for Intervenor

\_\_\_\_\_  
Acceptance for Board of Review

\_\_\_\_\_  
Acceptance for Intervenor

\_\_\_\_\_  
Acceptance for Board of Review

**Dissenting:**

Acceptance for TA: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Dissenting Board of Review Member/Commissioner

Please submit original stipulation by mail or email to the following address(s).

**Champaign County Board of Review**  
1776 E. Washington St.  
Urbana, IL 61802  
BOR@co.champaign.il.us

