

Objection to Real Property Assessment

To file an appeal on your property assessment, you must provide the Board of Review (BOR) clerk with written or oral notice of your intent under state law (sec. 70.47(7)(a), Wis. Stats.). You must also complete this entire form and submit it to your municipal clerk. To review the best evidence of property value, see the Wisconsin Department of Revenue's Guide for Property Owners.

Complete all sections:

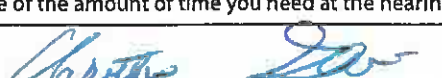
Section 1: Property Owner / Agent Information				* If agent, submit written authorization (Form PA-105) with this form			
Property owner name (on changed assessment notice) WILDE FAMILY LTD PARTNERSHIP				Agent name (if applicable) Christopher Glidewell			
Owner mailing address 150 N. Barlett				Agent mailing address 1550 E McKellips Rd., Suite 123			
City Medford		State OR	Zip 97501	City Mesa		State AZ	Zip 85203
Owner phone () -		Email		Owner phone (480) 634 - 6169		Email appeals@pivotaltax.com	
Section 2: Assessment Information and Opinion of Value							
Property address 1710 S T H #164				Legal description or parcel no. (on changed assessment notice) Parcel No. 1007039			
City Waukesha		State WI	Zip 53186				
Assessment shown on notice - Total \$7,445,600				Your opinion of assessed value - Total \$4,467,360			

If this property contains non-market value class acreage, provide your opinion of the taxable value breakdown:

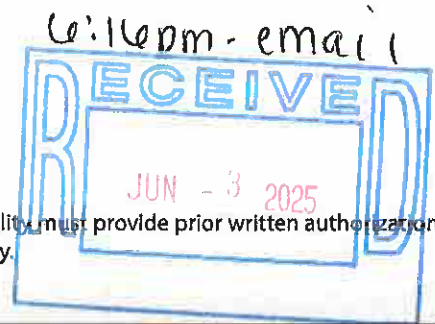
Statutory Class	Acres	\$ Per Acre	Full Taxable Value
Residential total market value			
Commercial total market value			
Agricultural classification: # of tillable acres	@	\$ acre use value	
# of pasture acres	@	\$ acre use value	
# of specialty acres	@	\$ acre use value	
Undeveloped classification # of acres	@	\$ acre @ 50% of market value	
Agricultural forest classification # of acres	@	\$ acre @ 50% of market value	
Forest classification # of acres	@	\$ acre @ market value	
Class 7 "Other" total market value		market value	
Managed forest land acres	@	\$ acre @ 50% of market value	
Managed forest land acres	@	\$ acre @ market value	

Section 3: Reason for Objection and Basis of Estimate	
Reason(s) for your objection: (Attach additional sheets if needed) Current market and economic conditions support a lower valuation of the subject property.	Basis for your opinion of assessed value: (Attach additional sheets if needed) Please see attached supporting documentation.

Section 4: Other Property Information	
A. Within the last 10 years, did you acquire the property? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide acquisition price \$ _____ Date - - - - - <input type="checkbox"/> Purchase <input type="checkbox"/> Trade <input type="checkbox"/> Gift <input type="checkbox"/> Inheritance (mm-dd-yyyy)	
B. Within the last 10 years, did you change this property (ex: remodel, addition)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, describe _____ Date of changes - - - - - Cost of changes \$ _____ Does this cost include the value of all labor (including your own)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (mm-dd-yyyy)	
C. Within the last five years, was this property listed/offered for sale? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, how long was the property listed (provide dates) - - - - - to - - - - - (mm-dd-yyyy) (mm-dd-yyyy) Asking price \$ _____ List all offers received _____	
D. Within the last five years, was this property appraised? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide: Date - - - - - Value _____ Purpose of appraisal _____ (mm-dd-yyyy) If this property had more than one appraisal, provide the requested information for each appraisal. _____	

Section 5: BOR Hearing Information	
A. If you are requesting that a BOR member(s) be removed from your hearing, provide the name(s): _____ Note: This does not apply in first or second class cities.	
B. Provide a reasonable estimate of the amount of time you need at the hearing _____ minutes.	
Property owner or Agent signature 	Date (mm-dd-yyyy) 6-3-2025

Agent Authorization for Property Assessment Appeals



If an agent is representing the property owner or municipality, the property owner or municipality must provide prior written authorization for the agent to represent the company or municipality when contacting the reviewing authority.

Section 1: Property Owner and Property Information

Company/property owner name WILDE FAMILY LTD PARTNERSHIP			Taxation district (Check one) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City		County Waukesha
Mailing address 1603 E Moreland Blvd			Street address of property See Attached Schedule A		
City Waukesha	State WI	Zip 53186	City	State	Zip
Parcel number See Attached Schedule A	Phone () -	Email	Fax () -		

Section 2: Authorized Agent Information

Name / title Christopher Glidewell, Austin Glidewell, Wayne Tannenbaum, Chaz Standage			Company name Pivotal Tax Solutions		
Mailing address 1550 E McKellips Rd, Suite 123			Phone (480) 634 - 6169	Fax (480) 615 - 0318	
City Mesa	State AZ	Zip 85203	Email Appeals@PivotalTax.com		

Section 3: Agent Authorization

Agent Authorized for: (check all that apply)		Enter Tax Years of Authorization	
<input type="checkbox"/> Manufacturing property assessment appeals (BOA)			
<input type="checkbox"/> Access to manufacturing assessment system (MAS)			
<input type="checkbox"/> Wisconsin Department of Revenue 70.85 appeals			
<input checked="" type="checkbox"/> Municipal Board of Review		2024, 2025	
<input type="checkbox"/> Other _____			
Authorization expires: _____ (mm-dd-yyyy)		(unless rescinded in writing prior to expiration)	
Send notices and other written communications to: (check one or both) <input type="checkbox"/> Authorized Agent <input type="checkbox"/> Property Owner			

Section 4: Agreement/Acceptance

I understand, agree and accept:

- The assessor's office may divulge any information it may have on file concerning this property
- My agent has the authority and my permission to accept a subpoena concerning this property on my behalf
- I will provide all information I have that will assist in the discussion and resolution of any assessment appeal of this property
- Signing this document does not relieve me of personal responsibility for timely reporting changes to my property and paying taxes, or penalties for failure to do so, as provided under Wisconsin tax law
- A photocopy and/or faxed copy of this completed form has the same authority as a signed original
- If signed by a corporate officer, partner, or fiduciary on behalf of the owner, I certify that I have the power to execute this Agent Authorization form

Section 5: Owner Grants Authorization

Owner Sign Here	Owner name (please print) Rodney Cole	
	Owner signature Rodney Cole	Digitally signed by Rodney Cole Date: 2024.02.28 14:33:24 -06'00'
	Company or title Tax Director	Date (mm-dd-yyyy) - -

6:16pm email
RECEIVED
Written Statement
JUN 10 2025
the board may allow the property
be before the board, under oath,

NOTE: The legal requirements of the Notice of Intent to Appear at the BOR must be satisfied and the Objection Form must be completed and submitted to the BOR as required by law prior to the Request to Testify by Telephone or Submit Sworn Written Statement form being submitted.

Municipality City of Waukesha	County Waukesha
Property owner's name WILDE FAMILY LTD PARTNERSHIP	Agent name (if applicable) Pivotal Tax Solutions
Owner's mailing address 150 N. Barlett Medford, OR 97501	Agent's mailing address 1550 E McKellips Rd., Suite 123 Mesa, AZ 85203
Owner's telephone number () - <input type="checkbox"/> Land Line <input type="checkbox"/> Cell Phone	Agent's telephone number (480) 634 - 6169 <input checked="" type="checkbox"/> Land Line <input type="checkbox"/> Cell Phone
Owner's email address	Agent's email address appeals@pivotaltax.com

1. Property address 1710 STH #164, Waukesha, WI 53186

2. Legal description or parcel number from the current assessment roll 1007039

3. Total Property Assessment	\$7,445,600
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4. If agent, attach signed Agent Authorization form, PA-105

☒ Testify by telephone* ☐ Submit sworn written statement

Basis for request: We are located out of state and traveling to the hearing would cause significant burden and expenses. Thank you for your consideration.

* If the request is approved, provide the best telephone number to reach you (480) 634 - 6169

Owner's or Agent's signature	Date
	6-3-25

☒ Approved ☐ Denied

Reason

☒ Taxpayer advised 6/6/2025
Date