



## Request to Testify by Telephone or Submit a Sworn Written Statement at the Board of Review (BOR)

Section 70.47(8), Wis. Stats., states "...Instead of appearing in person at the hearing, the board may allow the property owner, or the property owner's representative, at the request of either person, to appear before the board, under oath, by telephone or to submit written statements, under oath, to the board. ..."

**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

Please provide the following information on the property and the assessment to which you are objecting. (Attach additional sheets, if necessary.)

1. Property address 1603 E MORELAND BLVD, WAUKESHA, WI 53186-3919

2. Legal description or parcel number from the current assessment roll 1007040

3. Total Property Assessment \$6,163,200

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. We appreciate 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 <u>6-3-25</u>
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### For Board Use Only

☐ Approved     ☐ Denied

Reason \_\_\_\_\_

☐ Taxpayer advised \_\_\_\_\_

Date