

Objection to Real Property Assessment

To file an appeal on your property assessment, you must provide the Board of Review (BOR) clerk 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) SEELING PROPERTIES, L.L.C.			Agent name (if applicable)		
Owner mailing address 720 DELAFIELD ST			Agent mailing address		
City WAUKESHA	State WI	Zip 53188	City		
Owner phone 262-744-4000	Email gseeling@live.com		Owner phone () -		
			Email		
Section 2: Assessment Information and Opinion of Value					
Property address 348 WISCONSIN AVE.			Legal description or parcel no. (on changed assessment notice) 1308.725.000		
City WAUKESHA	State WI	Zip 53186			
Assessment shown on notice - Total 727,600			Your opinion of assessed value - Total 652,300		

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			652,300
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)
Capitalization rate of 6.5% is too low, Insurance marketplace amount property can only be insured to \$500k of management (daily) required

Basis for your opinion of assessed value: (Attach additional sheets if needed)

Section 4: Other Property Information (See over)

- A. Within the last 10 years, did you acquire the property? ☐ Yes ☒ No
If Yes, provide acquisition price \$ _____ Date (mm-dd-yyyy) _____ ☐ Purchase ☐ Trade ☐ Gift ☐ Inheritance
- B. Within the last 10 years, did you change this property (ex: remodel, addition)? ☐ Yes ☒ No
If Yes, describe _____
Date of changes (mm-dd-yyyy) _____ Cost of changes \$ _____ Does this cost include the value of all labor (including your own)? ☐ Yes ☒ No
- C. Within the last five years, was this property listed/offered for sale? ☐ Yes ☒ No
If Yes, how long was the property listed (provide dates) (mm-dd-yyyy) _____ to (mm-dd-yyyy) _____
Asking price \$ _____ List all offers received _____
- D. Within the last five years, was this property appraised? ☐ Yes ☒ No
If Yes, provide: Date (mm-dd-yyyy) _____ Value _____ Purpose of appraisal _____
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 G. Seeling	Date (mm-dd-yyyy) 05-04-2025
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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 Seeling Properties, L.L.C.			Taxation district (Check one) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City		County Waukesha
Mailing address P.O. Box 1901			Street address of property 348 Wisconsin Avenue		
City Waukesha	State WI	Zip 53187	City Waukesha	State WI	Zip 53186
Parcel number 1308.275.000		Phone (262) 744 - 4000	Email gseeling@live.com		Fax (262) 744 - 4000

Section 2: Authorized Agent Information

Name / title Gary Seeling / Managing Member			Company name Seeling Properties, L.L.C.		
Mailing address P.O. Box 1901			Phone (262) 744 - 4000		Fax (262) 521 - 9467
City Waukesha	State WI	Zip 53187	Email gseeling@live.com		

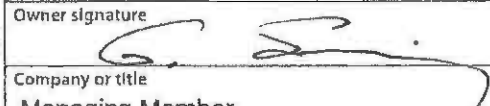
Section 3: Agent Authorization

Agent Authorized for: (check all that apply) <input type="checkbox"/> Manufacturing property assessment appeals (BOA) <input checked="" type="checkbox"/> Wisconsin Department of Revenue 70.85 appeals <input checked="" type="checkbox"/> Municipal Board of Review <input type="checkbox"/> Other _____		Enter Tax Years of Authorization _____ 2025 _____ 2025 _____	
Authorization expires: <u>12 - 31 - 2026</u> (mm - dd - yyyy)		(unless rescinded in writing prior to expiration)	
Send notices and other written communications to: (check one or both) <input checked="" type="checkbox"/> Authorized Agent <input checked="" type="checkbox"/> Property Owner			

Section 4: Agreement/Acceptance

I understand, agree and accept: <ul style="list-style-type: none"> 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 	
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Section 5: Owner Grants Authorization

Owner Sign Here	Owner name (please print) Gary Seeling	
	Owner signature 	
	Company or title Managing Member	Date (mm-dd-yyyy) 07 - 02 - 2025

**CITY OF WAUKESHA
2025 ASSESSMENT YEAR**

Notice of Intent to File Objection with Board of Review

I, GARY SEEELING (Insert name) as the property owner ^{and} ~~or as agent for~~
SEEELING PROPERTIES, L.L.C. (Insert property owner's name or ~~strike~~) with an address of
720 DEERFIELD ST. WAUKESHA 53888 hereby give notice of intent to file an
objection on the assessment for the following property: 348 WISCONSIN AVE.
(Insert address of subject property) with the parcel or tax ID number WAKC 1308.275.000 for the 2016
Assessment Year in the City of Waukesha.

Contact Information: Phone Number (262) 744-4000 Fax Number (262) 521-9467

THIS NOTICE OF INTENT IS BEING FILED: (please mark one)

- ☒ At least 48 hours before the Board's first scheduled meeting
☐ During the first two hours of the Board's first scheduled meeting (please complete Section A)
☐ Up to the end of the fifth day of the session or up to the end of the final day of the session if the session is less than five days (please complete Section B)

FILING OF THIS FORM DOES NOT RELIEVE THE OBJECTOR OF THE REQUIREMENT OF TIMELY FILING A FULLY COMPLETED WRITTEN OBJECTION ON THE PROPER FORM WITH THE CLERK OF THE BOARD OF REVIEW.

G. Seeeling (signed) if WRITTEN Received by: _____
June 4, 2025 (date) Check here if ORAL ____ On (date): _____

Section A: The Board of Review shall grant a waiver of the 48-hour notice of an intent to file a written or oral objection if a property owner who does not meet the notice requirement appears before the Board during the first two hours of the meeting, SHOWS GOOD CAUSE FOR FAILURE TO MEET THE 48-HOUR NOTICE REQUIREMENT AND FILES A WRITTEN OBJECTION. My good cause is as follows:

Section B: The Board of Review may waive all notice requirements and hear the objection even if property owner fails to provide written or oral notice of an intent to object 48 hours before the first scheduled meeting, and fails to request a waiver of the notice requirement during the first two hours of the meeting, if the property owner appears before the Board at any time up to the end of the fifth day of the session or up to the end of the final day of the session if the session is less than five days, and FILES A WRITTEN OBJECTION AND PROVIDES EVIDENCE OF EXTRAORDINARY CIRCUMSTANCES. Proof of my extraordinary circumstances is as follows:

A WRITTEN OBJECTION ON THE PROPER FORM MUST BE PROPERLY FILED WITH THE CLERK OF THE BOARD OF REVIEW NO LATER THAN WEDNESDAY JUNE 4, 2025 AT 9:00AM.