

Form 3103.A  
Exhibit A  
Appeal to Louisiana Tax Commission  
By Property Owner/Taxpayer or Assessor  
For Real and Personal Property

La. Tax Commission  
P. O. Box 66788  
Baton Rouge, LA 70896  
(225) 219-0339

Name: \_\_\_\_\_ Parish/District: \_\_\_\_\_  
**Property Owner/Taxpayer/Assessor**

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Ward: \_\_\_\_\_ Assess./Tax Bill No.: \_\_\_\_\_ Appeal No.: \_\_\_\_\_

(Attach copy of complete appeal submitted to the Board of Review)

Address or Legal Description of Property Being Appealed. **Also, please identify building by place of business for convenience of appraisal.**

\_\_\_\_\_  
\_\_\_\_\_

I hereby appeal the decision of the Board of Review on the assessment of the above described property pursuant to L.R.S. 47:1992. I timely filed my appeal as required by law.

**The original Fair Market Value by the assessor was:**

Land \$ \_\_\_\_\_ Improvement \$ \_\_\_\_\_ \* Personal Property \$ \_\_\_\_\_  
Total \$ \_\_\_\_\_

**The proposed Fair Market Value by the taxpayer was (at the Board of Review);**

Land \$ \_\_\_\_\_ Improvement \$ \_\_\_\_\_ \* Personal Property \$ \_\_\_\_\_  
Total \$ \_\_\_\_\_

**The Fair Market Value determined by the Board of Review was:**

Land \$ \_\_\_\_\_ Improvement \$ \_\_\_\_\_ \* Personal Property \$ \_\_\_\_\_  
Total \$ \_\_\_\_\_

\* If you are not appealing personal property, leave this section blank.

Note: Both parties have the right to appeal the Board of Review's decision. If you disagree with the Board of Review's determination, you must file an appeal. The appeal of a decision of the Board of Review by one party is not an appeal of that decision from the other party. To protect your rights, if you disagree with the determination of the Board of Review, you should file an appeal to the Louisiana Tax Commission challenging the Board of Review's determination regardless of whether or not the other party has appealed that decision.

**“PLEASE NOTE”**

[Appeals can be filed online.](#)

[www.latax.state.la.us](http://www.latax.state.la.us)

\_\_\_\_\_  
**Appellant:** (Property Owner/Taxpayer/Assessor)  
Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone No.: \_\_\_\_\_

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

Date of Appeal \_\_\_\_\_