Name and address of property owner:	
You are hereby notified that the assessment as of	1, 20, of the property described below in
Township,	
County, has been changed from \$ to \$	
County, has been changed from \$	to \$
Description of property	
and the property	
Notice to the taxpayer of the opportunity to appeal (IC 6-1.1-15-1.1, 1.2):	
If the taxpayer does not agree with the action of the assessing official giving this notice, an appeal can be initiated to	
challenge that action. To file an appeal, the taxpayer must file a Form 130, Taxpayer's Notice to Initiate an Appeal, with	
the township assessor or county assessor in a timely manner. The time-frame to file an appeal on the assessment contained in this notice may have two different filing deadlines. These deadlines are based on the date that this notice is	
mailed. If this notice is mailed before May 1 of the assessment year, the filing deadline is June 15 of that year. If this	
notice is mailed on or after May 1 of the assessment year, the filing deadline is June 15 in the year that the tax statements	
are mailed. (IC 6-1.1-15-1.1) This form is available from the assessing official or at:	
https://forms.in.gov/Download.aspx?id=6979. An assessing official who receives a Form 130 must schedule a preliminary informal meeting with the taxpayer in order to resolve the appeal. The assessing official and taxpayer must exchange the	
information each party is relying on at the time of the preliminary informal meeting to support the party's respective	
position on each disputed issue concerning the appeal. If the taxpayer has reason to believe that the township assessor,	
county assessor, an employee of the township assessor or county assessor, or an appraiser has violated IC 6-1.1-35.7- 3 or IC 6-1.1-35.7-4(a), the taxpayer may submit a written complaint to the Department of Local Government Finance	
under IC 6-1.1-35.7-4(b).	
NOTE: Failure to file a timely Form 130 can be grounds for dismissal of this appeal.	
DATED: day of, 20	
Signature of assessing official	Title of assessing official
	·
Typed or printed name of assessing official	Address of assessing official (number and street, city, state, and ZIP code)
To County Auditory	
To County Auditor: The reasons for and facts supporting the above action are as follows:	
Signature of assessing official	Date signed (month, day, year)