County Auditor's No.	County of:

Commissioner of Revenue Abatement Form 4 (Rev. 5/90)

APPLICATION FOR ABATEMENT – GENERAL FORM
(M.S. 375.192)

For Taxes Levied in 20_____
And Payable in 20_____

Please print or type.

Applicant's Name_____ Applicant's Mailing Address
Applicant's Social Security Number_____

Telephone (work) ( ) _____
Telephone (home) ( ) _____

DESCRIPTION OF PROPERTY Property I.D. or Parcel Number:

Street Address (if different than above) City or Township School District No.

Legal Description of Property:

ASSESSOR'S ESTIMATED MARKET VALUE:

Land $_____ Structures $_____ Total $_____Class _____

APPLICANT'S STATEMENT OF FACTS:

APPLICANT'S REQUEST

Applicant's Signature Date

NOTE: Minnesota Statutes 1988, Section 609.41, "Whoever, in making any statement, oral or written, which is required or authorized by law to be made as a basis of imposing, reducing, or abating any tax or assessment, intentionally makes any statement as to any material matter which the maker of this statement knows is false may be sentenced, unless otherwise provided by law, to imprisonment for not more than one year or to payment of a fine of not more than $3,000, or both."