



Board of County Commissioners Agenda Request

2Z
Agenda Item #

Requested Meeting Date: July 13, 2021

Title of Item: Sign County Board of Appeal Certification Form

<input type="checkbox"/> REGULAR AGENDA <input checked="" type="checkbox"/> CONSENT AGENDA <input type="checkbox"/> INFORMATION ONLY	Action Requested: <input type="checkbox"/> Approve/Deny Motion <input type="checkbox"/> Adopt Resolution (attach draft) <i>*provide copy of hearing notice that was published</i>	<input checked="" type="checkbox"/> Direction Requested <input type="checkbox"/> Discussion Item <input type="checkbox"/> Hold Public Hearing*
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Submitted by: Mike Dangers	Department: County Assessor
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Presenter (Name and Title): Mike Dangers, County Assessor	Estimated Time Needed:
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Summary of Issue:

The Minnesota Department of Revenue has a certification form that they require each County Board to sign at each meeting of the County Board of Appeal and Equalization. Typically this is done at the time of the meeting but the form was not available at that time. Since each member of the County Board was present at this meeting on June 22, I ask that each Board member sign by the "X" across from their name on the form attached to this agenda request.

Please contact Mike with any questions.

Alternatives, Options, Effects on Others/Comments:

Recommended Action/Motion:
Please sign the form as requested.

Financial Impact:

Is there a cost associated with this request? Yes No

What is the total cost, with tax and shipping? \$

Is this budgeted? Yes No *Please Explain:*

County Board of Appeal and Equalization Certification Form for 2021

The County Board of Appeal and Equalization (CBAE) must complete and sign the County Board of Appeal and Equalization Certification Form for each meeting. At the end of each CBAE meeting, the county assessor takes possession of the completed forms.

Note: If a CBAE completes its work in less than 10 days, it may adjourn at that time. No action taken by the CBAE after June 30 is valid. If the board calls a recess, a quorum also must be present at the reconvene meeting for the board to take valid action. In order to verify that the quorum requirement was met, the board must complete and sign a County Board of Appeal and Equalization Certification Form for each reconvene meeting. The date and time for the reconvene meeting must be determined before the initial meeting is recessed. Once the CBAE has adjourned they cannot reconvene.

Section 1 – The following information must be completed at the beginning of the meeting.

County name Aitkin	
Meeting (check one): <input checked="" type="checkbox"/> convened or <input type="checkbox"/> reconvened	Date June 22, 2021
	Time 4:00
	<input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m.
Appointments Required: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were appointments offered beyond 7:00pm: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Meeting (check one) <input checked="" type="checkbox"/> Convened	June 22, 2021 date
	4:00 time <input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m.
<input type="checkbox"/> Reconvened	_____ date _____ time <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.
Meeting (check one) <input type="checkbox"/> Recessed	<input checked="" type="checkbox"/> Adjourned
	June 22, 2021 date
	5:46 time <input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m.

County Board Members

List all voting members of the CBAE and indicate if each member was present or absent. All members present at the meeting must sign this form. By signing this form, you certify that:

- you attended the CBAE meeting along with the other board members marked as present on this form;
- the board heard appeals for the parcels listed and voted to act as indicated on the CBAE Record Form; and
- no board member participated in changes made to property owned by the board member, the board member's spouse, parent, stepparent, child, stepchild, grandparent, grandchild, brother, sister, uncle, aunt, nephew, or niece of the board member, or any property in which the board member has a financial interest.

For each **voting member** present, check "Yes" or "No" indicating if the member has completed the training required under Minnesota Statutes, Section 274.135 within the last four years. **All voting members present at the meeting must sign this form.**

Print names of all voting members	Title	Attendance	Training certified	Signature (for those in attendance only)
Mark Wedel	Chairman	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent	<input type="checkbox"/> Yes <input type="checkbox"/> No	X
Anne Marcotte	Commissioner	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent	<input type="checkbox"/> Yes <input type="checkbox"/> No	X
Don Niemi	Commissioner	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent	<input type="checkbox"/> Yes <input type="checkbox"/> No	X
Laurie Westerlund	Commissioner	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent	<input type="checkbox"/> Yes <input type="checkbox"/> No	X
Brian Napstad	Commissioner	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent	<input type="checkbox"/> Yes <input type="checkbox"/> No	X
		<input type="checkbox"/> Present <input type="checkbox"/> Absent	<input type="checkbox"/> Yes <input type="checkbox"/> No	X
Kirk Peysar	Auditor	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	X <i>Kirk Peysar</i>

Section 2 – Assessment Personnel

This section must be completed by the county assessor and by the county auditor (or, if the auditor cannot be present, the deputy county auditor, or, if there is no deputy, the court administrator of the district court).

County auditor (print name) Kirk Peysar	Other Assessment personnel present Please list additional names on the back of this form.
County auditor signature X <i>Kirk Peysar</i>	Name: <i>Lori Tibbetts</i> Title: <i>Asst. County Assessor</i>
County assessor (print name) Mike Dangers	Name: <i>Ben Mowers</i> Title: <i>Appraiser</i>
County assessor signature X <i>Mike Dangers</i>	Name: <i>Sean Mello</i> Title: <i>Appraiser</i>

Note: The CBAE cannot reduce the jurisdiction's total EMV by more than 1 percent. If the total amount of adjustments lowers the jurisdiction's total EMV by more than 1 percent, none of the adjustments will be allowed.