

Local Board of Equalization Meeting Minutes

The Township/City of Brandon Township convened as a
Board of Equalization on 3/18/2024, 2024.

Board Members present were:

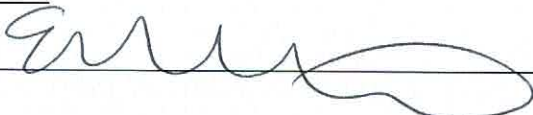
1. Thomas Brown
2. Jason Metzger
3. Dean Herll
4. Elizabeth Aaker

Chairman Jason Metzger called the meeting to order.

Action taken by the board on the following equalization matters are shown on the attached page(s). - Jess + Ann Schreurs parcel # 64700 presented camp houses in neighborhood showing how valued too high at \$1603,700. Would like lowered to \$526,700. After comparing comps Brown made motion to lower to \$615,000. Metzger second motion, Approved. Vote passed.

Motion by Tom Brown second by Jason Metzger to adjourn as a Board of Equalization.

Date: 3/18/2024

Attest: Finance Officer/Clerk 

Minutes of Brandon Township City/Township, for Local Board of Equalization held on March 18, 2024.

RDID # 64700 (ONLY ONE RECORD PER MOTION) OWNER: _____
LEGAL: Tract 6 Swer's Addn E 1/2 N 1/4 28 102 48
Brandon Township 102-48

MOTION BY:
Name of Person making motion: Thomas Brown

To change? Lower assessed value to \$615,000

SECOND BY:
Name of person making motion: Jason Metzger

MOTION: **CARRIED** or **FAILED**
Reason for Motion Carrying: all voted

RDID # _____ (ONLY ONE RECORD PER MOTION) OWNER: _____
LEGAL: _____

MOTION BY:
Name of Person making motion: _____

To change? _____

SECOND BY:
Name of person making motion: _____

MOTION: **CARRIED** or **FAILED**
Reason for Motion Carrying: _____

Minutes of _____ City/Township, for Local Board of Equalization held on March _____, 2024.

RDID # _____ (ONLY ONE RECORD PER MOTION) **OWNER:** _____

LEGAL: _____

MOTION BY:

Name of Person making motion: _____

To change? _____

SECOND BY:

Name of person making motion: _____

MOTION: _____ **CARRIED** or **FAILED**

Reason for Motion Carrying: _____



RDID # _____ (ONLY ONE RECORD PER MOTION) **OWNER:** _____

LEGAL: _____

MOTION BY:

Name of Person making motion: _____

To change? _____

SECOND BY:

Name of person making motion: _____

MOTION: _____ **CARRIED** or **FAILED**

Reason for Motion Carrying: _____

OBJECTION TO REAL PROPERTY ASSESSMENT
SDCL 10-11-13 thru SDCL 10-11-42

USE A SEPARATE FORM FOR EACH LEGAL DESCRIPTION - IF BARE AGRICULTURAL LAND, USE PT 17A

COURTHOUSE USE ONLY
APPEAL NUMBERS
Local Board:
County Board:
Office of Hearing Examiners:

APPLICANT INFORMATION

ASSESSED IN NAME OF Jess & Ann Schreurs	EMAIL schreurjc@yahoo.co	PHONE NUMBER 605-366-2214	COUNTY MINNEHAHA
MAILING ADDRESS 48095 260th	CITY Brandon	STATE SD	ZIP CODE 57005
PROPERTY ADDRESS - if different than mailing address		PARCEL NUMBER 64700	
LEGAL DESCRIPTION OF PROPERTY BEING APPEALED - include lot, block, addition, city or section, township, and range TRACT 6 SWIER'S ADDN E1/2 NE1/4 28 102 48 Brandon Township 102-48			

I AM APPEALING THE: ABSTRACT CLASS EXEMPT STATUS OWNER-OCCUPIED PROPERTY VALUE STATUS

REASON(S) FOR APPEALING

In 2023 our assessed value increased 36.6% and in 2024 increased another 29.7%. Our research show our property is not assessed equitably in relationship to other properties.

IN MY OPINION, THE FULL AND TRUE VALUE OF SAID PROPERTY SHOULD BE:
 \$ 526,700 TOTAL VALUE \$ 126,700 LAND VALUE \$ 400,000 BUILDING VALUE

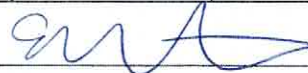
By signing this document, I certify that I am authorized to sign and that the above information is true and correct.

SIGNATURE Jen Schreurs DATE 18 Mar 24
 TAXPAYER / TAXPAYER ATTORNEY

COMPLETED BY LOCAL BOARD OF EQUALIZATION – ACTION BY LOCAL BOARD OF EQUALIZATION

NO CHANGE TO ASSESSOR'S VALUE CHANGED CLASSIFICATION CHANGED VALUATION

ABSTRACT TYPE	ASSESSOR VALUE FROM	LOCAL BOARD TO	CLASSIFICATION FROM	CLASSIFICATION TO	ASSESSOR RECOMMENDED VALUE	ASSESSOR RECOMMENDED CLASSIFICATION
1.	\$ 663,700	\$ 615,000			\$	
2.	\$	\$			\$	
3.	\$	\$			\$	
4.	\$	\$			\$	
5.	\$	\$			\$	

JURISDICTION Brandon Township CLERK SIGNATURE  DATE 3-18-24

COMPLETED BY DIRECTOR OF EQUALIZATION PRIOR TO COUNTY BOARD OF EQUALIZATION

I, _____ make the following recommendation for the current year on the above stated property:

ABSTRACT TYPE	ASSESSOR VALUE FROM	LOCAL BOARD TO	CLASSIFICATION FROM	CLASSIFICATION TO	ASSESSOR RECOMMENDED VALUE	ASSESSOR RECOMMENDED CLASSIFICATION
1.	\$	\$			\$	
2.	\$	\$			\$	
3.	\$	\$			\$	
4.	\$	\$			\$	
5.	\$	\$			\$	

DIRECTOR OF EQUALIZATION OFFICE SIGNATURE _____ DATE _____

COMPLETED BY COUNTY BOARD OF EQUALIZATION – FINAL VALUE BY COUNTY BOARD OF EQUALIZATION

ABSTRACT TYPE	TO	CLASSIFICATION FROM	CLASSIFICATION TO
1.	\$		
2.	\$		
3.	\$		
4.	\$		
5.	\$		

COUNTY AUDITOR SIGNATURE _____ DATE _____

- Original copy: OHE (if appealed to that body)
- First copy: retained by county (if appealed to county board)
- Second copy: to assessor (if appealed to county board)
- Third copy: to objector (after action by local board)