



**DECISION OF THE VALUE ADJUSTMENT BOARD  
HURRICANE IAN OR HURRICANE NICOLE TAX REFUND**  
Sections 197.3181, Florida Statutes

DR-5002  
N. 07/23  
Rule 12D-16.002  
F.A.C.  
Eff. 07/23

\_\_\_\_\_ County

The actions below were taken on your petition.

These actions are a recommendation only, not final     These actions are a final decision of the VAB

If you are not satisfied after you are notified of the final decision of the Value Adjustment Board (VAB), you have the right to file a lawsuit in circuit court to further contest your assessment. (See sections 193.155(8)(l), 194.036, 194.171(2), 194.181, and 196.151, F.S.)

Petition # _____	Parcel ID _____
Petitioner name _____ The petitioner is: <input type="checkbox"/> taxpayer of record <input type="checkbox"/> taxpayer's representative  <input type="checkbox"/> other, explain: _____	Property address _____

**Decision Summary**     Denied your petition     Granted your petition     Granted your petition in part

Just value of the residential parcel as of January 1 of the year the disaster occurred. \$ _____	Filed by applicant	Property appraiser determined	VAB determined
1. Number of days residential property was uninhabitable			
2. Postdisaster just value			
3. Percentage change in value			

**Reasons for Decision** Fill-in fields will expand, or add pages as needed.

Findings of Fact

  
  
  

Conclusions of Law

  
  
  

**Recommended Decision of Special Magistrate**    Findings and conclusions above are recommendations.

Signature, special magistrate	Print name	Date
Signature, clerk or special representative, VAB	Print name	Date

If this is a recommended decision, the board will consider the recommended decision on \_\_\_\_\_ at \_\_\_\_\_  
Address \_\_\_\_\_

If the line above is blank, the board does not yet know the date, time, and place when the recommended decision will be considered. To find the information, please call \_\_\_\_\_ or visit website \_\_\_\_\_.

**Final Decision of the Value Adjustment Board**

Signature, chair, VAB	Print name	Date of decision
Signature, clerk or representative, VAB	Print name	Date mailed to parties