Reinhart Attorneys at Law

Reinhart Boerner Van Deuren s.c.
P.O. Box 2018
Madison, WI 53701-2018

22 East Mifflin Street
Suite 700
Madison, WI 53703

Telephone: 608-229-2200
Facsimile: 608-229-2100
reinhartlaw.com

MAY 23 2022

May 20, 2022

Don M. Millis
Direct Dial: 608-229-2234
dmillis@reinhartlaw.com

SENT VIA E-MAIL (cchristen@ci.stoughton.wi.us)
AND FIRST-CLASS MAIL

Candee J. Christen, Clerk
City of Stoughton
207 South Forrest Street
Stoughton, WI 53589

Dear Clerk:

Re: 2500 Jackson Street
Parcel No. 0510-014-1015-2

Enclosed please find an Objection to Real Property Assessment and Request for Waiver of Board of Review Hearing filed on behalf of KPW Hospitality, LLC to the 2022 property tax assessment for the above-referenced property. We request that you waive the hearing on the objection. However, should the Board of Review decide to hold a hearing on this matter, please provide me with 48 hours' notice of the time, date and place of the Board of Review hearing

Thank you for your attention to this matter, please contact me if you have any questions.

Sincerely,

Don Millis

Don M. Millis

47403715

Encs.

Objection to Real Property Assessment

To file an appeal on your property assessment, you must provide the Board of Review (BOR) clerk written or oral notice of your intent, under state law (sec. 70.47(7)(a), Wis. Stats.). You must also complete this entire form and submit it to your municipal clerk. To review the best evidence of property value, see the Wisconsin Department Revenue's *Property Assessment Appeal Guide for Wisconsin Real Property Owners.*

Complete all sections: *** If agent, submit written authorization (Form PA-105) with this form**

Section 1: Property Owner / Agent Information

Property owner name *(on changed assessment notice)* KPW Hospitality, LLC		Agent name *(if applicable)* Reinhart Boerner Van Deuren s.c, including but not limited to, Don M. Millis, Sara Rapkin, Shawn Lovell, and Karla Nettleton	
Owner mailing address 161 Horizon Dr., Suite 101A		Agent mailing address 22 E. Mifflin Street, Suite 700	
City Verona	State WI / Zip 53593	City Madison	State WI / Zip 53703
Owner phone (608) 848 - 9050	Email fad@forwarddevgroup.com	Owner phone (608) 229 - 2234	Email dmillis@reinhartlaw.com

Section 2: Assessment Information and Opinion of Value

Property address 2500 Jackson Street		Legal description or parcel no. *(on changed assessment notice)* 0510-014-1015-2	
City Stoughton	State WI / Zip	Your opinion of assessed value – **Total** $3,520,000	
Assessment shown on notice – **Total** $8,755,300			

If this property contains non-market value class acreage, provide your opinion of the taxable value breakdown:

Statutory Class	Acres	$ Per Acre	Full Taxable Value
Residential total market value			
Commercial total market value			
Agricultural classification: # of tillable acres		@ $ acre use value	
# of pasture acres		@ $ acre use value	
# of specialty acres		@ $ acre use value	
Undeveloped classification # of acres		@ $ acre @ 50% of market value	
Agricultural forest classification # of acres		@ $ acre @ 50% of market value	
Forest classification # of acres		@ $ acre @ market value	
Class 7 "Other" total market value		market value	
Managed forest land acres		@ $ acre @ 50% of market value	
Managed forest land acres		@ $ acre @ market value	

Section 3: Reason for Objection and Basis of Estimate

Reason(s) for your objection: *(Attach additional sheets if needed)* Exceeds fair market value of property.	Basis for your opinion of assessed value: *(Attach additional sheets if needed)* Information previously provided to Assessor.

Section 4: Other Property Information

A. Within the last 10 years, did you acquire the property? ☒ Yes ☐ No
If Yes, provide acquisition price $ 2,045,000 Date 3 - 22 - 2019 *(mm-dd-yyyy)* ☒ Purchase ☐ Trade ☐ Gift ☐ Inheritance

B. Within the last 10 years, did you change this property (ex: remodel, addition)? ☒ Yes ☐ No
If Yes, describe Construction of an 88 room hotel
Date of changes 8 - 20 - 2020 *(mm-dd-yyyy)* Cost of changes $ 9,800,000 Does this cost include the value of all labor (including your own)? ☒ Yes ☐ No

C. Within the last five years, was this property listed/offered for sale? ☐ Yes ☒ No
If Yes, how long was the property listed *(provide dates)* - - *(mm-dd-yyyy)* to - - *(mm-dd-yyyy)*
Asking price $ _____ List all offers received _____

D. Within the last five years, was this property appraised? ☒ Yes ☐ No
If Yes, provide: Date 2 - 20 - 2019 *(mm-dd-yyyy)* Value $9,100,000 Purpose of appraisal Construction loan.
If this property had more than one appraisal, provide the requested information for each appraisal. _____

Section 5: BOR Hearing Information

A. If you are requesting that a BOR member(s) be removed from your hearing, provide the name(s): n/a
Note: This does not apply in first or second class cities.

B. Provide a reasonable estimate of the amount of time you need at the hearing 30 minutes.

Property owner or Agent signature Don Millis	Date *(mm-dd-yyyy)* 05 - 20 - 2022

Request for Waiver of Board of Review (BOR) Hearing

Section 70.47 (8m), Wis. Stats., states, "The board may, at the request of the taxpayer or assessor, or at its own discretion, waive the hearing of an objection under sub. (8) or, in a 1st class city, under sub. (16) and allow the taxpayer to have the taxpayer's assessment reviewed under sub. (13). For purposes of this subsection, the board shall submit the notice of decision under sub. (12) using the amount of the taxpayer's assessment as the finalized amount. For purposes of this subsection, if the board waives the hearing, the waiver disallows the taxpayer's claim on excessive assessment under sec. 74.37(3) and notwithstanding the time period under sec. 74.37(3)(d), the taxpayer has 60 days from the notice of hearing waiver in which to commence an action under sec. 74.37(3)(d)."

NOTE: The legal requirements of the Notice of Intent to Appear must be satisfied and the Objection Form must be completed and submitted as required by law prior to the Request for Waiver of Board of Review Hearing being submitted.

NOTE: Request for Waiver must be presented prior to the commencement of the hearing.

Municipality: Stoughton	County: Dane
Requestor's name: KPW Hospitality, LLC	Agent name *(if applicable)* *Reinhart Boerner Van Deuren s.c., including but not limited to, Don Millis, Sara Rapkin, Shawn Lovell, Karla Nettleton
Requestor's mailing address: 161 Horizon Dr., Suite 101A, Verona, WI 53593	Agent's mailing address: 22 E. Mifflin Street, Suite 700, Madison, WI 53703
Requestor's telephone number: ( ) - ☐ Land Line ☐ Cell Phone	Agent's telephone number: (608) 229 - 2200 ☒ Land Line ☐ Cell Phone
Requestor's email address:	Agent's email address: dmillis@reinhartlaw.com

Property address: 2500 Jackson Street	
Legal description or parcel number: 0510-014-1015-2	
Taxpayer's assessment as established by assessor – Value as determined due to waiving of BOR hearing: $ 8,755,300	
Property owner's opinion of value: $ 3,520,000	
Basis for request: Previous year in litigaiton	
Date Notice of Intent to Appear at BOR was given: 04 - 12 - 2022	Date Objection Form was completed and submitted: 05 - 20 - 2022

All parties to the hearing understand that in granting of this waiver there can be no appeal to the Department of Revenue under sec. 70.85, Wis. Stats. An action under sec. 70.47(13), Wis. Stats., must be commenced within 90 days of the receipt of the notice of the waiving of the hearing. An action under sec. 74.37(3)(d), Wis. Stats., must be commenced with 60 days of the receipt of the notice of the waiving of the hearing.

Don Millis

Requestor's / Agent's Signature

***If agent, attach signed Agent Authorization Form, PA-105**

Decision

☐ Approved ☐ Denied

Reason _____

_____ *Date*

Board of Review Chairperson's Signature

☐ Taxpayer advised _____ *Date*

Agent Authorization

for Property Assessment Appeals

If an agent is representing the property owner or municipality, the property owner or municipality must provide prior written authorization for the agent to represent the company or municipality when contacting the reviewing authority.

Section 1: Property Owner and Property Information

Company/property owner name: KPW Hospitality, LLC		Taxation district (Check one) ☐ Town ☐ Village ☒ City; Enter municipality → Stoughton	County: Dane
Mailing address: 161 Horizon Drive, Suite 101A		Street address of property: 2500 Jackson Street	
City: Verona	State: WI; Zip: 53593	City: Stoughton	State: WI; Zip:
Parcel number: 0510-014-1015-2	Phone: ( ) -	Email:	Fax: ( ) -

Section 2: Authorized Agent Information

Name / title: Don Millis, Sara Rapkin, Shawn Lovell and Karla Nettleton		Company name: Reinhart Boerner Van Deuren s.c.
Mailing address: 22 E. Mifflin Street, Suite 700		Phone: (608) 229 - 2200; Fax: (608) 229 -2100
City: Madison	State: WI; Zip: 53703	Email:

Section 3: Agent Authorization

Agent Authorized for: *(check all that apply)*

Enter Tax Years of Authorization

- ☐ Manufacturing property assessment appeals (BOA) _____
- ☐ Access to manufacturing assessment system (MAS) _____
- ☐ Wisconsin Department of Revenue 70.85 appeals _____
- ☒ Municipal Board of Review 2022 and subsequent years until revoked in writing
- ☐ Other _____ _____

Authorization expires: _____ - - _____ *(mm - dd - yyyy)* (unless rescinded in writing prior to expiration)

Send notices and other written communications to: *(check one or both)* ☒ Authorized Agent ☒ Property Owner

Section 4: Agreement/Acceptance

I understand, agree and accept:

- The assessor's office may divulge to the agent any information it may have on file concerning this property
- My agent has the authority and my permission to accept a subpoena concerning this property on my behalf, but this grant of authority and permission does not cure or waive any defect in the subpoena or the manner in which it was served
- Signing this document does not relieve me of personal responsibility for timely reporting changed to my property and paying taxes, -- or penalties for failure to do so, as provided under Wisconsin tax law.
- A photocopy and/or faxes copy of this completed form has the same authority as a signed original.
- If signed by a corporate officer, partner, or fiduciary on behalf of the owner, I certify that I have the power to execute this Agent Authorization form.

Section 5: Owner Grants Authorization

Owner Sign Here ▶	Owner name *(please print)*: Ronald J. Hershue	
	Owner signature:	Date *(mm-dd-yyyy)*: 04-12-2022
	Company or title: Director of Operations	