SPECIAL ASSESSMENT/CHARGE
REQUEST FOR REVIEW
CITY CLERK TREASURER
625 52nd STREET, ROOM 105
KENOSHA, WI 53140
262-653-4020 cityclerk@kenosha.org

Date _____

Your Name _____

Your Phone Number _____ Email _____

Your Address _____
(Address/City/State/Zip)

City of Kenosha Property Address _____

City of Kenosha Property Parcel Number _____

Type of Special Assessment/Charge

	Board-up fee
	Reinspection fee
	Penalty fee
	Sidewalk
	Snow removal
	Trash & Debris removal
	Other

Amount _____

How were you made aware of the special assessment/charge? _____

_____

Have you contacted any City department? If so, when (date) and who did you speak with?

_____

_____

Provide an explanation as to why the special assessment/charge should be reviewed and specify the adjustment amount you are requesting:

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