

Village of Fontana  
PO Box 200  
Fontana, WI 53125  
(262) 275-6136 (262) 275-8088 (fax)

Assessment Year 2024

**VILLAGE OF FONTANA-ON-GENEVA LAKE**

**Notice of Intent to File Objection with Board of Review**

I, \_\_\_\_\_ as the property owner or agent for \_\_\_\_\_,  
with and address of \_\_\_\_\_, hereby give notice of an intent to file an objection on  
the assessment for the following property: \_\_\_\_\_.

Tax Key Number: \_\_\_\_\_ for the \_\_\_\_\_ Assessment Year in the Village of Fontana.

THIS NOTICE OF INTENT IS BEING FILED: (please mark one)

- \_\_\_\_\_ At least 48 hours before the Board's first scheduled meeting.
- \_\_\_\_\_ During the first two hours of the Board's first scheduled meeting (complete Section A)
- \_\_\_\_\_ Up to the end of the fifth day of the session or up to the end of the final day of the session if the session is less than five days (complete Section B)

**Section A:** The Board of Review shall grant a waiver of the 48-hour notice of an intent to file a written or oral objection if a property owner who does not meet the notice requirement appears before the Board during the first two hours of the meeting. **SHOWS GOOD CAUSE FOR FAILURE TO MEET THE 48-HOUR NOTICE REQUIREMENT AND FILES A WRITTEN OBJECTION.** My good cause is as follows:

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**Section B:** The Board of Review may waive all notice requirements and hear the objection even if property owner fails to provide written or oral notice of an intent to object 48 hours before the first scheduled meeting, and fails to request a waiver of the notice requirement during the first two hours of the meeting, if the property owner appears before the Board at any time up to the end of the fifth day of the session or up to the end of the final day of the session if the session is less than five days, and **FILES A WRITTEN OBJECTION AND PROVIDES EVIDENCE OF EXTRAORDINARY CIRCUMSTANCES.** Proof of my extraordinary circumstances are as follows:

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**FILING OF THIS FORM DOES NOT RELIEVE THE OBJECTOR OF THE REQUIREMENT OF TIMELY FILING A FULLY COMPLETED WRITTEN OBJECTION ON THE PROPER FORM WITH THE CLERK OF THE BOARD OF REVIEWS.**

Signature: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_