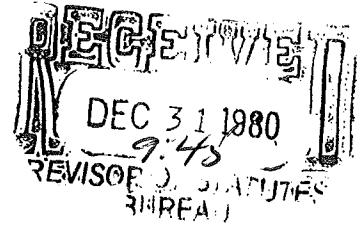


TOX 12.05

CERTIFICATE OF EMERGENCY RULE ADOPTION

STATE OF WISCONSIN)
DEPARTMENT OF REVENUE) SS




TO ALL TO WHOM THESE PRESENTS SHALL COME, GREETINGS:

I, Mark E. Musolf, Secretary of the Department of Revenue and custodian of the official records of said department do hereby certify that the annexed emergency rules relating to temporary certification ss 73.09(1) and (6) Wis. Stats. were duly approved and adopted by this department on December 31, 1980.

I further certify that said copy has been compared by me with the original on file in this department and that the same is a true copy thereof, and of the whole of such original.

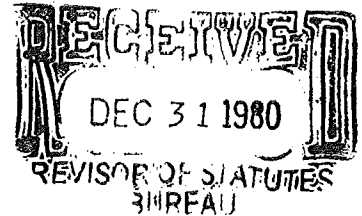
IN TESTIMONY, WHEREOF, I have hereunto set my hand at 125 South Webster Street in the City of Madison, this 31st day of December, 1980.


Mark E. Musolf
Secretary of Revenue

ORDER OF THE DEPARTMENT OF REVENUE
ADOPTING EMERGENCY RULES

Relating to rules concerning:

Temporary certification.



Analysis Prepared by Department of Revenue

Chapter 221, Laws of 1979 created s. 73.09, Wis. Stats., requiring the department of revenue to establish by rule the requirement for and responsibilities associated with temporary certification.

This rule establishes the procedures for attaining temporary certification and prescribes the duties that may be performed by temporarily certified individuals.

Pursuant to authority vested in the department of revenue by s. 73.09(1), Wis. Stats., the department hereby adopts rules interpreting sections 73.09(1) and (6), Wis. Stats., as follows:

Chapter TAX 12.05 of the WISCONSIN ADMINISTRATIVE CODE is adopted to read:

Tax 12.05 Temporary certification. (ss. 73.09(1) and (6), Stats.)

(1) APPROVAL. Temporary certification shall be approved under the following conditions:

- (a) The applicant shall not have been temporarily certified previously.
- (b) The applicant shall have a job commitment from an elected or appointed assessor, from a firm contracting to make the assessment under ss. 70.05(2), 70.055, or 70.75, Stats., or a job offer from the bureau of property tax.
- (c) The certified individual signing the assessment roll for a local tax unit of government or county assessor system under s. 70.99, Stats., or the applicant's immediate supervisor if in the bureau of property tax, shall be responsible to see that the following conditions are met:
 1. The effective start and end dates of temporary certification are adhered to.
 2. No more than two temporarily certified individuals employed by private firms may be permitted to perform assessment related functions in the same municipality.

(2) APPLICATION. Application for temporary certification shall be in writing and notarized on the form prescribed by the department of revenue.

- (3) WHEN VALID. Temporary certification shall become effective upon the mailing of a letter of approval by the department of revenue and valid until the results of the next assessor certification examination are issued. No temporary certification shall be in effect for more than 100 days.
- (4) AUTHORIZED DUTIES. A temporary certified individual shall be authorized to perform in accordance with the Wisconsin Property Assessment Manual, and under the direct supervision of the certified individual in subsection (1) paragraph (c) of this section, the duties defined for the lowest assessment technician level of local assessor certification under Chapter Tax 12.06, Wis. Adm. Code.

The rule contained in this order shall take effect upon publication in the official state newspaper pursuant to the authority granted by section 227.027(1) Wis. Stats., as an emergency rule.

FINDING OF EMERGENCY

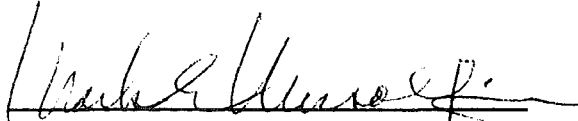
The Department of Revenue finds that an emergency exists and that the attached rule is necessary for the immediate preservation of public peace, health, safety or welfare. A statement of the facts constituting the emergency is:

Chapter 221, Laws of 1979 specified temporary certification of assessment personnel to become effective January 1, 1981. This emergency rule establishes the requirements of temporary certification. All property must be valued as of January 1 in each year with the assessment task completed by the first Monday in May. The majority of an assessment office's workload occurs during the period of the effective dates of this emergency rule. Without this rule many assessment offices would not be able to hire the technician level individuals needed in the initial data collection stage of the assessment process. If the emergency rule is not adopted, local assessment jurisdictions would not have the opportunity to benefit from the legislative intent of temporary certification until one year after its effective date.

Dated: December 31, 1980

DEPARTMENT OF REVENUE

By:


Mark E. Musolf
Secretary of Revenue

| |
|-----------------------------|
| LRB or Bill No. |
| Adm. Rule No. Tax 12.05 |
| Amendment No. if Applicable |

If there is a state or local fiscal effect, attach worksheet.

Subject: Temporary Certification

| | | |
|---------------|--|--|
| Fiscal Effect | | |
| State: | <input type="checkbox"/> Increase Existing Appropriation | <input type="checkbox"/> Increase Costs -- May Be Possible to Absorb Within Agency's Budget <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | <input type="checkbox"/> Decrease Existing Appropriation | <input type="checkbox"/> Decrease Costs |
| | <input type="checkbox"/> Create New Appropriation | <input checked="" type="checkbox"/> No State Fiscal Effect |
| | <input type="checkbox"/> Increase Existing Revenues | |
| | <input type="checkbox"/> Decrease Existing Revenues | |

| | | |
|--|---|---|
| Local: | <input type="checkbox"/> No Local Fiscal Effect | |
| 1. <input type="checkbox"/> Increase Costs | | |
| | <input type="checkbox"/> Permissive | <input type="checkbox"/> Mandatory |
| 2. <input type="checkbox"/> Decrease Costs | | |
| | <input type="checkbox"/> Permissive | <input type="checkbox"/> Mandatory |
| 3. <input type="checkbox"/> Increase Revenues | | |
| | <input type="checkbox"/> Permissive | <input type="checkbox"/> Mandatory |
| 4. <input type="checkbox"/> Decrease Revenues | | |
| | <input type="checkbox"/> Permissive | <input type="checkbox"/> Mandatory |
| 5. Types of Local Governmental Units Affected: | | |
| | <input type="checkbox"/> Towns | <input type="checkbox"/> Villages <input type="checkbox"/> Cities |
| | <input type="checkbox"/> Counties | <input type="checkbox"/> Others _____ |

| | |
|---|--------------------------------|
| Fund Sources Affected | Affected Ch. 20 Appropriations |
| <input type="checkbox"/> GPR <input type="checkbox"/> FED <input type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEG-S | |

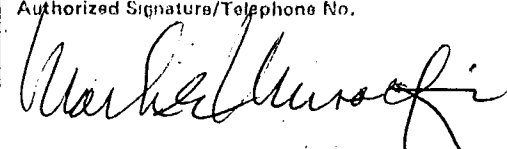
Assumptions Used in Arriving at Fiscal Estimate

Temporary certification of assessment personnel will place an additional burden on the clerical support in the Assessor Certification and Training Unit. This additional record keeping should be able to be absorbed by the present staff.

There will be no fiscal effect on local governmental units.

Long-Range Fiscal Implications

None

| | | |
|---------------------------------|--|------|
| Agency Department of Revenue | Authorized Signature/Telephone No.  | Date |
|---------------------------------|--|------|

NOTE
TAX RULE 12.05

Pursuant to s. 227.024(4) the department of revenue shall make available, at no cost, copies of forms required by the proposed rule upon request. Please address inquiries for additional information to:

TAX RULE 12.05
Division of State/Local Finance
Department of Revenue
125 South Webster Street
Madison, Wisconsin 53702

APPLICATION FOR TEMPORARY CERTIFICATION at Assessment Technician Level

INSTRUCTIONS: Please complete all information fully and accurately. Approval of Temporary Certification will be based on the information contained on this application. Please type or print all information in ink. Be sure to sign page 2.

SEND APPLICATION TO:
 Wisconsin Department of Revenue
 Bureau of Property Tax
 ATTN: Assessor Certification
 125 South Webster
 Madison, Wisconsin 53702

PERSONAL INFORMATION

| | | | | | | | | | |
|---|--|---|--|--|--|-------------------------|--|-------|----------|
| Name (Last) | | (First) | | (Middle Initial) | | Social Security Number* | | | |
| Present Mailing Address (Number and Street or R.R.) | | | | City | | County | | State | Zip Code |
| Permanent Address if Different From Mailing Address | | | | City | | County | | State | Zip Code |
| Present Occupation | | Residence Telephone Number Area Code () | | Business Telephone Number Area Code () | | Birth Date | | Age | |

CERTIFICATION INFORMATION

Examination for Which You are Applying:
 Assessment Technician
 Property Appraiser
 Assessor 1
 Assessor 2
 Assessor 3 (May only perform the duties prescribed for an Assessor 3)

When Do You Prefer to Take This Exam?
 February
 May
 August
 November

Exams in February and August are Only Offered in Madison, Where Do You Prefer to Take the Exam if in May or November?
 Madison
 Eau Claire
 Green Bay
 Wausau
 Pewaukee

Do You Presently Hold Any:

| | | | |
|--|------------------------------|-----------------------------|---------------|
| Wisconsin Assessor Certifications? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Number: _____ |
| Assessor Certifications From Other States? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Level: _____ |
| Real Estate Sales/Brokers Licenses? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Title: _____ |
| Professional Assessment/Appraisal Designation? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Title: _____ |

Temporary Certification is For the Lowest Level of Assessor Certification and is Granted Only Once.

Have You:

| | | | |
|---|------------------------------|-----------------------------|---------------------|
| Ever Been Temporarily Certified in Wisconsin? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | If yes, when? _____ |
| Ever Attempted a Certification Exam? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | If yes, when? _____ |

EDUCATION, TRAINING AND EXPERIENCE

Education, Circle Highest Year Completed (an individual who graduated from high school would circle 12, a technical school graduate would circle 14, a college graduate would circle 16).

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20

Indicate any Assessment/Appraisal Courses That You Have Attended By Checking the Appropriate Box and Giving Dates.

| | | | |
|--------------------|---|--|--|
| Vocational School: | <input type="checkbox"/> Law & Administration _____ | <input type="checkbox"/> Valuation 1 _____ | <input type="checkbox"/> Valuation 2 _____ |
| SREA: | <input type="checkbox"/> 101 _____ | <input type="checkbox"/> 201 _____ | |
| AIREA: | <input type="checkbox"/> IA _____ | <input type="checkbox"/> IB _____ | |
| IAAO: | <input type="checkbox"/> Course 1 _____ | <input type="checkbox"/> Course 2 _____ | |

Other Related Course Work Not Included in Above (list course and dates):

Give Dates and Duties of Latest Assessment/Appraisal Related Work Experience:

TEMPORARY CERTIFICATION AT THE ASSESSMENT TECHNICIAN LEVEL

Temporary certification. (ss. 73.09(1) and (6), Stats.) (1) Approval. Temporary certification shall be approved under the following conditions:

(a) The applicant shall not have been temporarily certified previously.

(b) The applicant shall have a job commitment from an elected or appointed assessor, from a firm contracting to make the assessment under ss. 70.05(2), 70.055, or 70.75, Stats., or a job offer from the bureau of property tax.

(c) The certified individual signing the assessment roll for a local unit of government or county assessor system under s. 70.99, Stats., or the applicant's immediate supervisor if in the bureau of property tax, shall be responsible to see that the following conditions are met:

1. The effective start and end dates of temporary certification are adhered to.

2. No more than two temporarily certified individuals employed by private firms may be permitted to perform assessment related functions in the same municipality.

(2) Application. Application for temporary certification shall be in writing and notarized on the form prescribed by the department of revenue.

(3) When valid. Temporary certification shall become effective upon the mailing of a letter of approval by the department of revenue and valid until the results of the next assessor certification examination are issued. No temporary certification shall be in effect for more than 100 days.

(4) Authorized duties. A temporarily certified individual shall be authorized to perform in accordance with the Wisconsin Property Assessment Manual, and under the direct supervision of the certified individual in subsection (1) paragraph (c) of this section, the duties defined for the lowest assessment technician level of local assessor certification under Chapter Tax 12.06, Wis. Adm. Code.

APPLICANT

I have read the above rule on temporary certification and understand the requirements for, and responsibilities associated with temporary certification. I certify that all information on this application is true and complete to the best of my knowledge, and that any false or omitted information may disqualify me from certification. Furthermore, I authorize the release of the pass/fail results of my assessor certification exam over the phone to the certified assessor signing below.

Sign Here _____ Date _____ Social Security No.* _____

CERTIFIED ASSESSOR (With Notarized Signature)

I have read the above rule on temporary certification and understand that I am responsible to see that the applicant only: (1) performs the duties prescribed for the assessment technician level, (2) works in the T V C of _____ (approval must be obtained prior to working in a different municipality), (3) functions as an assessment technician during the effective dates established in the notification of approval. I am the statutory assessor for the above indicated municipality and realize that temporary certification is not valid until receipt of the notice of approval from the Wisconsin Department of Revenue.

Name (Print) _____ Date _____
Signature _____ Certification No. _____

Subscribed and sworn to me on this date

Signed _____
Notary Public
County of _____
My Commission Expires On _____

FOR DEPARTMENT OF REVENUE USE ONLY - DO NOT WRITE IN THESE AREAS

Application for Temporary Certification: Approved Disapproved, Reason _____

Effective Dates of Temporary Certification: From _____ to _____ Inclusive

Signed _____ Date _____ Temporary Certification Number _____

*Providing your social security number is voluntary. By providing it, however, you help insure the accuracy of your records. Your number will be kept in strict confidence with access only by the Assessor Certification and Training Unit.