APPEAL OF ASSESSMENT FOR DIGEST YEAR :

Appeal No:

Home Phone	
Work Phone	
Email Address	

Property / Appeal Type (Check One)

☐ Real ☐ Personal ☐ Motor Vehicle ☐ Manufactured Home

Property ID Number	
Property Description	

Account Number: 1

Specify Grounds for Appeal:

Check all that apply	
Value	
Uniformity	
Taxability	
Exemption Denied	
Breach of Covenant	
Denial of Covenant	

You must select only one of the following options:

☐ BOE:appeal to the county board of equalization with appeal to the superior court (any / all grounds)

* ☐ ARBITRATION: to arbitration without an appeal to the superior court (valuation is only grounds that may be appealed to arbitration)

* ☐ HEARING OFFICER: for a parcel of nonhomestead property with a FMV in excess of $1 million, to a hearing officer with appeal to superior court (value and uniformity only)

* ☐ SC: Directly to Superior Court (requires consent of BOA) (any / all grounds)

* Additional Cost / Fees May apply

Property Owner Comments: _____

Property Class ☐ Residential ☐ Commercial ☐ Industrial ☐ Agricultural ☐ Other _____

Signature of Property Owner or Agent _____

NOTE: if the appeal form is signed by an agent, a letter of authorization must accompany the filing of the appeal.

Agent's Address: _____

Agent's Phone #: _____

Agent's Email Address: _____

NOTE: Filing of this document will create a review of the county's value of the property being appealed. Reasonable notice is hereby provided that an onsite inspection by a member of the county appraisal staff may be required.

	Previous Year Value	Taxpayer's Returned Value	Current Year Value
100%			
40%			

Date Received: _____ Received by: _____