

FULTON COUNTY BOARD OF ASSESSORS

141 PRYOR STREET, SUITE 2052

ATLANTA, GA 30303

404-612-6440



2014 APPEAL OF ASSESSMENT FORM

Property Owner's Name		Home Phone:	
Address		Work Phone:	
		Cell Phone:	
Email Address:			
Property / Appeal Types (Check One)			
Real <input type="checkbox"/>	Personal <input type="checkbox"/>	Motor Vehicle <input type="checkbox"/>	Manufactured Home <input type="checkbox"/>
Property ID Number			
Property Description			
Specify Grounds for Appeal: Check all that apply			
Value <input type="checkbox"/>	Uniformity <input type="checkbox"/>	Taxability <input type="checkbox"/>	Exemption Denied <input type="checkbox"/>
		Breach of Covenant <input type="checkbox"/>	Denial of Covenant <input type="checkbox"/>
You must select one of the following options:			
<input type="checkbox"/>	BOE: Appeal to the county board of equalization with appeal to the superior court (any / all grounds)		
<input type="checkbox"/>	* ARBITRATION: To arbitration without an appeal to the superior court (valuation is only grounds that may be appealed to arbitration)		
<input type="checkbox"/>	* HEARING OFFICER: For a parcel of non-homestead property with a FMV in excess of \$1 million, to a hearing officer with appeal to superior court (value and uniformity only)		
* Additional cost / fees may apply			
Property Owner Comments: _____			
<u>Owner's Opinion of Value \$</u>			
Signature of Property Owner or Agent: _____			
Note: If you are not the owner a Letter of Authorization is required			
Print Name Owner/Agent _____			
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 appraised. Reasonable notice is hereby provided that an onsite inspection by a member of the county appraisal staff may be required.			
Date Received:		Received by:	