

**FORSYTH COUNTY BOARD OF ASSESSORS
110 E MAIN ST STE 260
CUMMING GA 30040**

APPEAL OF ASSESSMENT FOR DIGEST YEAR :

Appeal No: _____

Owner's Name	_____	Home Phone	_____
Owner's Address	_____	Work Phone	_____
Owner's Address	_____	Email Address	_____
Owner's City	_____	State	_____
		Zip	_____

Property / Appeal Type (Select One)

Real Personal Motor Vehicle Manufactured Home

Property ID Number	_____	Account Number	_____
Property Description	_____		

Specify Grounds for Appeal:

You must select only one of the following options:

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"/>

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

* ARBITRATION: to arbitration with an appeal to the superior court (valuation is only grounds that may be appealed to arbitration)

HEARING OFFICER: for (1) nonhomestead real property (and contiguous real property) or (2) wireless personal property account(s) with a FMV in excess of \$500,000 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**

Owner's value assertion (REQUIRED) _____

Property Owner Comments _____

Property Class Residential Commercial Industrial Agricultural Other: _____

Signature of Property Owner or Agent ** Printed Name of Property Owner or Agent Date

****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 assessment. Reasonable notice is herein provided that an onsite inspection of the subject property by a member of the county appraisal staff may be performed.

Assessors Use Only		Previous Year Value	Taxpayer's Returned Value	Current Year Value
	100%	_____	_____	_____
	40%	_____	_____	_____

Date Received:	_____	Received By:	_____
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