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DEKALB COUNTY APPEAL OF ASSESSMENT FOR DIGEST YEAR : 2018				
Appeal No:				
Name	Home Phone			
Address	Work Phone			
Address Email Address				
City State Zip				
Property / Appeal Type (Check One)				
Real	Personal	Motor Vehicle	Manufactured Home	
Property ID Number				
Property Description				
Specify Grounds for Appeal: You must select only one of the following options:				
Check all that apply Value	Il that apply BOE:appeal to the county board of equalization with appeal to the superior court (any / all grounds)			
Uniformity	* ARBITRATION: to arbitration with an appeal to the superior court (valuation is only grounds that may be appealed to arbitration)			
Taxability				
Exemption Denied	HEARING OFFICER: for (1) nonhomestead real property (and contiguous real property) or (2) wireless personal property account(s) with a FMV in excess of			
Breach of Covenant	ach of Covenant \$750,000, to a hearing officer with appeal to superior court (value and uniformity			
Denial of Covenant	only) * SC: Directly to Superior Court (requires consent of BOA) (any / all grounds)			
Owner's value assertion (required) * Additional Cost / Fees May apply				
Property Owner Comments				
Property Class Residential	Commercial	ndustrial Agricultural	Other:	
Signature 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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