

Office use only: DG15 CA09 Backup Sig/Own BOE #

**Kane County Board of Equalization: REQUEST FOR REVIEW**

Please complete one form per parcel and return to Kane County Auditor, 76 N Main, Kanab, UT 84741, NO LATER THAN 5:00 PM September 15, 2008. (435) 644-2458

**For Office Use**

Account #  
Serial #  
Date  
Clerk

Owner's Name	Home Telephone Number
Street Address (mailing)	State & Zip
Agents Name	Work Telephone Number
Property Location	Serial # (Tax ID / Parcel ID)

Property Type: Vacant Land Commercial Residential Agricultural FAA Other

**Reason for Appeal:**

- Recent sale of property (attach copy of closing document)
- Recent appraisal of subject property
- Capitalized income derived from commercial property
- Recent sale of comparable properties
- Other (must include sufficient detail)

Comments

Additional comments may be attached.

**Taxpayer's Rights:**

I do wish to appear before the County Board. If I do not appear before the Board I understand that a decision will be made based on the information I have provided and that I retain my right to appeal the Board's decision to the State Tax Commission if I am not satisfied. Include your daytime telephone number above.

**Office Use Only:**

- Taxpayer issued a Board of Equalization appointment
- Taxpayer was issued a Notice of Intent to Deny the Appeal and given 10 working days to submit additional information.

I certify that all statements here and before the Board are true and correct to the best of my knowledge. I understand that all information submitted to the Board, and the decision of the Board are public record. If the Board is unable to make a decision prior to November 30<sup>th</sup>, I am still responsible to pay all taxes due to avoid penalties and interest. If a refund is necessary it will include interest starting January 1<sup>st</sup>.

Signature X Date Owner Other

Authorization attached (if signature is from someone other than owner)