

FULTON COUNTY BOARD OF ASSESSORS  
235 Peachtree Street, NE, Suite 1200  
ATLANTA, GEORGIA 30303  
404-612-6440



APPEAL OF MOTOR VEHICLE ASSESSMENT FOR DIGEST YEAR: 2016

Vehicle Owner's Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Email address: \_\_\_\_\_

Vehicle Appeal Type (Check One)  
 Ad Valorem  Title Tax

Vehicle ID Number: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Vehicle Year/Make/Model: \_\_\_\_\_

Specify Grounds For Appeal:  Value  Taxibility  Exemption Denial  
**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 superior court (valuation is only ground that may be appealed)  
\*  Affidavit of Illegality  
\* **Additional cost/fees and bond may apply**

Vehicle Owner Comments: \_\_\_\_\_

Owner's Opinion of Value: \_\_\_\_\_

Signature Of Vehicle 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 Name & Mailing Address: (Please Print) \_\_\_\_\_  
Agent's Telephone #: \_\_\_\_\_  
Agent's Email Address: \_\_\_\_\_

**Note: Filing of this document will create a review of the fair market value of the vehicle being appealed. Reasonable notice is hereby provided that an onsite inspection by a member of the county appraisal staff may be required.**

Received By: \_\_\_\_\_ Date Received: \_\_\_\_\_