

HALL COUNTY BOARD OF TAX ASSESSORS
 Personal Property Department
 300 Henry Ward Way, Suite 203
 P.O. Box 1780
 Gainesville, GA 30503
 770-531-6749

MOTOR VEHICLE APPEAL FORM

1. OWNER INFORMATION

Vehicle Owner:	
Address:	Owner's Phone #:

2. VEHICLE INFORMATION

Vehicle Identification #:	Vehicle Mileage as of January 1 of this year:
Year, Make, Model, Body Type, etc.:	Color:
Vehicle Cost: \$	Date Vehicle Purchased:

3. List any optional equipment included with vehicle when purchased:

4. Statement of vehicle condition including history of accidents, damage or repairs if applicable:

5. Please check vehicle inspection location preference if deemed necessary by Tax Assessors.

- () Taxpayers Residence
 () Tax Assessors Office (300 Henry Ward Way, Suite 203)

6. Have you paid current tax due on this vehicle? () Yes () No

7. Basis of complaint: (Check appropriate basis)

- () Excessive Value () Uniformity () Taxability

8. Owners opinion of value as of January 1 of this year: \$ _____

NOTE: STATE LAW REQUIRES MOTOR VEHICLES TO BE VALUED AT THE AVERAGE OF THE FAIR MARKET VALUE AND THE WHOLESALE VALUE AS OF JANUARY 1 OF THE TAXABLE YEAR.

9. Additional taxpayer comments:

NOTE: A COPY OF YOUR CURRENT STATE OF GEORGIA REGISTRATION FORM MVD PAID RECEIPT MUST BE SUBMITTED WITH THIS FORM WHEN FILING AN APPEAL.

VEHICLE APPEALS MUST BE FILED WITH THE HALL COUNTY TAX ASSESSORS, PERSONAL PROPERTY DEPT. ON OR BEFORE THE REGISTRATION EXPIRATION DATE IN ORDER FOR THE BOARD OF TAX ASSESSORS TO REVIEW THE VALUATION ON THE MOTOR VEHICLE REGISTRATION FORM. FAILURE TO FILE APPEAL TIMELY WILL RESULT IN LOSS OF APPEAL RIGHTS.

I CERTIFY THAT I HAVE CAREFULLY READ AND HAVE DULY CONSIDERED THE QUESTIONS PROPOUNDED IN THIS APPEAL FORM AND THE INFORMATION SUPPLIED, INCLUDING THE VEHICLE MILEAGE, IS CORRECT AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF.	
_____	_____
AGENT/OWNERS SIGNATURE	DATE