BOARD OF EQUALIZATION PROTEST FORM

Name				Case No			
Mailing Addr	ess		P	arcel No.			
			ion (Property	Address):			
Nature of Con	mplaint:						
Tax Payer's Signature						Date	
Tax Payer's C	comments:						
Action By the	e Board Due t	o The Followi	ng:				
	Appraised Value	Adjusted Value	Assessed Value	Board's Value	Decrease Value	Increase Value	
Land							
Improvement	S						
Date			Approve	Approved By			