

## PETITION TO THE VALUE ADJUSTMENT BOARD TAX DEFERRAL OR PENALTIES REQUEST FOR HEARING

DR-486DP R. 01/17 Rule 12D-16.002 F.A.C. Eff. 01/17

COMPLETED BY CLERK OF THE VALUE ADJUSTMENT BOARD (VAB)					
Petition #	County		Tax year 20	Date received	
COMPLETED BY THE PETITIONER					
PART 1. Taxpayer Information					
Taxpayer name		Representative			
Mailing address for notices		Parcel ID and physical address or TPP account #			
Phone		Email			
<ul> <li>The standard way to receive information is by US mail. If possible, I prefer  email  fax.</li> <li>I am filing this petition after the petition deadline. I have attached a statement of the reasons I filed late and any documents that support my statement.</li> <li>I will not attend the hearing but would like my evidence considered. You must submit duplicate copies of your evidence to the value adjustment board clerk. Florida law allows the tax collector to cross examine or object to your evidence. The ruling will occur under the same statutory guidelines as if you were present.</li> </ul>					
PART 2. Type of Deferral or Penalty Appeal					
<ul> <li>Disapproval of homestead tax deferral</li> <li>Disapproval of affordable rental tax deferral</li> <li>Disapproval of recreational and commercial working waterfront tax deferral</li> <li>Penalties imposed under section 197.301, F.S., homestead, affordable rental housing property, or recreational and commercial working waterfront</li> <li>You must submit a copy of the original application for tax deferral filed with the tax collector and related documents.</li> </ul>					
Enter the time (in minutes) you will need to present your case. Most hearings take 15 minutes. The VAB is not bound by the requested time. For single joint petitions for multiple parcels, enter the time needed for the entire group.					
There are specific dates my witnesses or I will not be available to attend. I have attached a list of dates.					
At the hearing, you have the right to have witnesses sworn.					

Your petition will not be complete until you pay the filing fee. When the VAB has reviewed and accepted it, they will assign a number, send you a confirmation, and give a copy to the tax collector. Unless the person filing the petition is completing part 4, the taxpayer must sign the petition in part 3. Alternatively, the taxpayer's written authorization or power of attorney must accompany the petition at the time of filing with the signature of the person filing the petition in part 5 (s. 194.011(3), F.S.). Please complete one of the signatures below.

PART 3. Taxpayer Signature					
Complete part 3 if you are representing yourself or if you are without attaching a completed power of attorney or authorizated Written authorization from the taxpayer is required for access tax collector.	ntion for representation to this form.  It is to confidential information from the property a	appraiser or			
☐ I authorize the person I appoint in part 5 to have access to Under penalties of perjury, I declare that I am the owner of the petition and the facts stated in it are true.					
Signature, taxpayer	Print name	Date			
PART 4. Employee, Attorney, or Licensed Profes					
Complete part 4 if you are the taxpayer's or an affiliated entity representatives.	's employee or you are one of the following lic	ensed			
I am (check any box that applies):					
	(taxpayer or an affiliated entity).				
A Florida Bar licensed attorney (Florida Bar number	).	,			
A Florida real estate appraiser licensed under chapter 475, Florida Statutes (license number					
A Florida real estate broker licensed under chapter 475, Florida Statutes (license number					
A Florida certified public accountant licensed under chapter 473, Florida Statutes (license number)					
I understand that written authorization from the taxpayer is recappraiser or tax collector.	quired for access to confidential information fro	om the property			
Under penalties of perjury, I certify that I have authorization to am the owner's authorized representative for purposes of filin process under s. 194.011(3)(h), Florida Statutes, and that I have a support of the control of the con	g this petition and of becoming an agent for se	ervice of			
Signature, representative	Print name	Date			
PART 5. Unlicensed Representative Signature					
Complete part 5 if you are an authorized representative not list	sted in part 4 above.				
$\ \ \square$ I am a compensated representative not acting as one of the above AND (check one)	he licensed representatives or employees liste	d in part 4			
$\ \square$ Attached is a power of attorney that conforms to the requitaxpayer's authorized signature OR $\ \square$ the taxpayer's authorized		ted with the			
☐ I am an uncompensated representative filing this petition a	AND (check one)				
☐ the taxpayer's authorization is attached OR ☐ the taxpay	er's authorized signature is in part 3 of this for	m.			
I understand that written authorization from the taxpayer is recappraiser or tax collector.	quired for access to confidential information fro	om the property			
Under penalties of perjury, I declare that I am the owner's aut of becoming an agent for service of process under s. 194.011 the facts stated in it are true.					
Signature, representative	Print name	Date			