

KING COUNTY BOARD OF APPEALS AND EQUALIZATION

HEARING PARTICIPATION FORM

Instructions: use this form to request a withdrawal, hearing reschedule, or alternate hearing accommodations.

Mail to: King County Board of Equalization
500 Fourth Avenue, Room 510
Seattle, WA 98104-2306
OR Email scanned copy to: BOE@kingcounty.gov

For office use only

1. PETITION IDENTIFICATION

Petition Number _____

Account/Parcel Number _____

If additional petitions are affected, attach list. Number of pages: _____

2. REQUESTED HEARING PARTICIPATION SELECTION

Check the following statement that applies (only check one):

1. I hereby WITHDRAW my appeal. I understand a hearing will not be held and this appeal will be resolved.
2. I AGREE TO THE ASSESSOR'S RECOMMENDED VALUE of \$ _____. I understand a hearing will not be held unless the Board needs further information to support the recommended value.
3. I will NOT ATTEND. Please make a determination on my appeal based on the submitted evidence. I would like the Board to review my appeal: On my assigned hearing date OR As soon as possible
4. I will PARTICIPATE VIA PHONE. I will call 206-477-3400 at my scheduled hearing time.
5. I would like to request a one-time RESCHEDULE of my hearing. This request is being made within 7 business days of the mailing date on my hearing notice.
6. I would like an INTERPRETER that speaks _____ at my hearing.
7. I am unable to submit evidence at this time and I will not participate in the hearing; however, I would like the Board to issue a decision on my appeal which will ALLOW ME TO FILE AN APPEAL WITH THE WSBA.
8. I would like an EXPEDITED HEARING within the next 30 days (you must have received your Assessor's Response and you must have submitted all your evidence in order to qualify for an expedited hearing). Please schedule my hearing for one of the following dates (must be a Mon, Tues, Wed, or Thurs. Hearings are not held on Fridays) 1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____ 4th Choice: _____
Please note, you will not be granted a reschedule request if your hearing is assigned to one of these days.

3. CERTIFICATION

I hereby certify I am authorized to transact business relating to the assessment appeal of the above identified property.

Signature of Petitioner/ Authorized Agent _____

Date _____

Printed Name (and Title if applicable) _____

Phone Number _____

Company Name (if applicable) _____

Email Address _____

Please Call 206-477-3400 or email BOE@kingcounty.gov with any questions regarding this form.

Notes:

- Withdrawal Requests – A petitioner may withdraw a petition as a matter of right by written notice if received by the Board up to the time of the hearing. Only the petitioner or authorized agent can withdraw an appeal (ref. WAC 458-14-076(1)).
- Reschedule Requests – All reschedule requests/continuances are granted at the discretion of the Board. Generally, one-time reschedule requests will be approved by the Board if made within 7 business days of the mailing date printed on the hearing notice. If a reschedule request is submitted after the allowed 7-business day period and the request is denied, the petitioner may select from one of the other hearing participation options listed in Section 2 above (ref. WAC 458-14-160(1)).