



Board of Equalization

4430 South Adams County Parkway
5th Floor, Suite C5000A
Brighton, CO 80601-8204
PHONE 720.523.6105

TELEPHONE HEARING REQUEST FORM

Please note - to be eligible for a telephone hearing, this form must be submitted to the BOE Coordinator at least two (2) days prior to the scheduled hearing

Date: _____

Property Owner(s): _____

Name of Agent (if applicable): _____

Adams County Account Number: _____

Adams County Parcel Number: _____

BOE Review Number: _____

BOE Hearing Date and Time: _____

I _____ (property owner or authorized agent) request that my BOE hearing scheduled on _____ at _____ am/pm be conducted via telephone conference. I will be available for the hearing officer(s) to contact me at (____)____-____.

By selecting to conduct my hearing via telephone I acknowledge that I will receive a phone call from the hearing officer(s) on or about my scheduled hearing time. I realize that a representative from the Adams County Assessor's Office will be present during that phone call and that all argument and presentation will be conducted over the phone. I realize that every attempt will be made by the hearing officer(s) to contact me at my scheduled time; however, I may receive the call at a slightly different time due to unforeseen circumstances

Signature of Property Owner or Authorized Agent