



ALABAMA TAX TRIBUNAL Notice of Appeal Motor Vehicle Disputes

FORM
ATT-3
1/2024

www.taxtribunal.alabama.gov

7515 Halcyon Summit Drive • Suite 103 • Montgomery, AL 36117 • (334) 954-7195

(1) PETITIONER NAME

(2) PETITIONER MAILING ADDRESS (Street, City, State, Zip Code)

(3) TELEPHONE NUMBERS

FAX

I consent to electronic
(paperless) communications.

(4) PETITIONER'S REPRESENTATIVE (Complete and attach Alabama Tax Tribunal Power of Attorney Form 2848ATT)

(5) AUTHORIZED REPRESENTATIVE'S MAILING ADDRESS (Street, City, State, Zip Code)

(6) TELEPHONE NUMBERS

FAX

I consent to electronic
(paperless) communications.

(7) MAKE, MODEL, AND VEHICLE IDENTIFICATION NUMBER

(8) Check the appropriate box below identifying the type of dispute you are appealing:

Motor vehicle title

Revocation/refusal to issue a dealer's license or designated agent status

Mandatory liability insurance

Other (please specify) _____

(9) Attach a copy of the Revenue Department's notice or correspondence from which you are appealing. You may also submit a copy of all records, correspondence, etc., that is relevant to your appeal.

(10) Generally state the facts relevant to your appeal, and why you dispute or disagree with the Revenue Department's action. Attach additional pages if necessary.

Petitioner's signature

Date

Authorized Representative (Complete and attach Alabama Tax Tribunal Power of Attorney Form 2848ATT)

Date

Mail To: Alabama Tax Tribunal
7515 Halcyon Summit Drive, Suite 103
Montgomery, AL 36117