

ALABAMA TAX TRIBUNAL Notice of Appeal Motor Vehicle Disputes



www.taxtribunal.alabama.gov

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

(1) PETITIONER NAME				
(2) PETITIONER MAILING ADDRESS	S (Street, City, State, Zi	ip Code)		
(3) TELEPHONE NUMBER	E-MAIL		I consent to electronic (paperless) communications.	
(4) PETITIONER'S REPRESENTATIVE	Complete and attach	Alabama Tax Tribunal Power of Attorney Form 2848ATT)		
(5) AUTHORIZED REPRESENTATIV	E'S MAILING ADDRES	SS (Street, City, State, Zip Code)		
(6) TELEPHONE NUMBER	E-MAIL		I consent to electronic (paperless) communications.	
(7) MAKE, MODEL, AND VEHICLE	IDENTIFICATION NU	IMBER		
(8) Check the appropriate b	ox below identify	ving the type of dispute you are appealing:		
Motor vehicle title		Revocation/refusal to issue a dealer's lice	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

Date

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

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