

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) PETI	TIONER NAME				
(2) PET	TIONER MAILING ADDRESS (Street	et, City, State, Zip Code)			
(3) TEL	EPHONE NUMBER	E-MAIL			consent to electronic (paperless) communications.
(4) PETI	TIONER'S REPRESENTATIVE (Com	plete and attach Alabama Ta	x Tribunal Power of Attorney Form 2848ATT)		
(5) AUT	HORIZED REPRESENTATIVE'S MA	AILING ADDRESS (Street, 0	City, State, Zip Code)		
(6) TEL	EPHONE NUMBER	E-MAIL			I consent to electronic (paperless) communications.
(7) MAK	E, MODEL, AND VEHICLE IDENT	TFICATION NUMBER		,	/
(8) Cł	neck the appropriate box be	elow identifying the t	ype of dispute you are appealing:		
	Motor vehicle title		Revocation/refusal to issue a dealer's license or designated agent status		
	Mandatory liability insurance		ther (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 are relevant to your appeal.				
(10) Generally state the facts relevant to your appeal, and why you dispute or disagree wi Attach additional pages if necessary.					Department's action.
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(11)		on to the Alabama	u would like to be considered, you may inc Tax Tribunal, please submit clean copies o	-	* *
Detic					Deta:
Petitio	ner's signature			L	Date
Author	rized Representative (Complet	e and attach Alabama	Tax Tribunal Power of Attorney Form 2848ATT)		Date

Mail To: Alabama Tax Tribunal

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Montgomery, AL 36117