

# Muscogee County Board of Equalization Reschedule Form

Mail this form to:	Muscogee County Board of Equalization PO Box 2145 Columbus, GA 31902-2145
Fax this form to:	Attn: Muscogee County Board of Equalization (706) 225-4287
Email this form to:	boe@columbusga.org

**Parcel Number(s):** \_\_\_\_\_

**Name of Appellant(s):** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Representative:** \_\_\_\_\_

**Company:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Original Hearing Date:** \_\_\_\_\_ **Original Hearing Time:** \_\_\_\_\_

I would like to RESCHEDULE my appointment with the Muscogee County Board of Equalization. I understand that the new date and time will be provided to me when made available and that a new hearing notice will be sent to the property owner or representative address. I understand that with the exception of a genuine emergency, this is the only time I am permitted to reschedule my appointment.

\_\_\_\_\_  
Appellant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Representative Signature

\_\_\_\_\_  
Date