



**Utah State Tax Commission**  
**Taxpayer Appeal to County Board of Equalization**  
**of Uniform Fee for Registered Vehicles and Boats Over 31 Feet**

TC-702  
Rev. 4/06

County: \_\_\_\_\_ Date: \_\_\_\_\_

**Owner Information**

Name		Office use only (appeal no.)	
Street address		Telephone number	
City	State	Zip	

**Appeal Information**

Reasons for appeal

- High mileage documented as of January 1 of this year
- Significantly damaged condition as of January 1 of this year. Must be documented by a signed statement from a bonded dealer or a bonded body shop (ATTACH ORIGINAL SIGNED STATEMENT)
- Other: \_\_\_\_\_

**Vehicle Information**

Vehicle location (complete address where kept, city, state, zip)	Office use only (tax area)
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Vehicle Type (check one)

- Motor home
- Boats (over 31 Feet)
- Commercial Truck
- Commercial Trailer
- Other: \_\_\_\_\_

Vehicle identification number			Odometer reading as of January 1 of this year		
Year	Make	Model	Body style	Number of cylinders	Gross weight

Damaged condition—cost to repair per signed statement from a bonded dealer or a bonded body shop: \$ \_\_\_\_\_

**Owner/Authorized Designee Signature**

If form is completed by someone other than the owner, that person must attach an authorization form signed by owner.

I certify that all statements presented on this form and before the Board are true, complete, and correct to the best of my knowledge.

Signature	Date
<input type="checkbox"/> Owner	
<input type="checkbox"/> Authorized designee (ATTACH AUTHORIZATION FORM)	