

**REQUEST FOR WAIVER OF FILING DEADLINE  
FOR APPEAL TO THE GRANT COUNTY BOARD OF EQUALIZATION  
FOR GOOD CAUSE**

{WAC 458-14-056(3)}

Parcel No. \_\_\_\_\_

Assessment Year \_\_\_\_\_ for Tax Year \_\_\_\_\_

I hereby request that the Board of Equalization waive the filing deadline for my petition to appeal the Assessor's determination regarding my property. I am the taxpayer of record and swear that I was unable to file an appeal in a timely manner because of the following reason:

**(Please be very specific about the reason, and attach any pertinent documentation)**

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| Name of Property Owner (Print) | Telephone |
| Address                        |           |
| City, State, Zip               |           |

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**NOTE: This form must be filed within a reasonable time after the filing date.**

PO Box 37                      35 C St. NW  
Ephrata, WA 98823  
509-754-2011 ext. 331

**All BOE forms are available in alternate format upon request**