



**VALUE ADJUSTMENT BOARD  
NOTICE OF HEARING**  
Section 194.032, Florida Statutes

DR-481  
R. 12/25  
Rule 12D-16.002, F.A.C.  
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Provisional

County		Petition #		Petition type	
Petitioner name			VAB contact		
Address		Address			
Parcel number, account number, or legal address		Phone		Email	

- A hearing has been scheduled for
- your petition
  - the continuation of your hearing after remand
  - other

**YOUR HEARING INFORMATION**

Hearing date		Hearing address and room
Time <small>(if block of time, beginning and end times)</small>		
Time reserved		

Bring \_\_\_\_\_ copies of your evidence if you are attending your hearing in person, in addition to what you have provided to the property appraiser. Evidence becomes part of the record and will not be returned. Please arrive 15 minutes before the scheduled hearing time or start of block of time with any witnesses. If you or your witnesses are unable to attend, or you need help finding the hearing room, contact the VAB clerk as soon as possible.

You have the right to reschedule your hearing one time for good cause as defined in section 194.032(2)(a), F.S. As defined in that section, "good cause" means circumstances beyond the control of the person seeking to reschedule the hearing which reasonably prevent the party from having adequate representation at the hearing. **YOU MUST EXCHANGE EVIDENCE WITH THE PROPERTY APPRAISER AT LEAST 15 DAYS BEFORE THE HEARING.** You must submit your evidence directly to the property appraiser. Your evidence is due by \_\_\_\_\_ at \_\_\_\_\_. At the hearing, you have the right to have witnesses sworn.

_____ Signature, deputy clerk		_____ Date	
For a list of potential magistrates	Phone	Web	
For a copy of the value adjustment board uniform rules of procedure	Phone	Web	
<p>If you need accommodations to participate in the hearing, you are entitled to assistance with no cost to you. Please contact the value adjustment board at the number above within 2 days of receiving this notice. Pursuant to the Americans with Disabilities Act, any person requiring special accommodations is asked to advise the value adjustment board by contacting: _____. If you are hearing or speech impaired, please contact the board using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).</p>			

### **Hearings Using Electronic or Other Communication Equipment**

Rule 12D-9.001(2)(i), Florida Administrative Code provides “You have the right to appear at the hearing using electronic or other communication equipment upon written request at least 10 calendar days before the date of the hearing, in any county having a population of 75,000 or more, and in any county having a population of less than 75,000 that has not opted out as provided by law...”

To calculate the ten (10) days, use calendar days and do not include the day of the hearing in the calculation, and count backwards from the day of the hearing, using the calendar day before the hearing day as day 1. The last day of the ten (10) day period is included unless it is a Saturday, Sunday, or legal holiday, in which event the period runs until the end of the next previous day that is neither a Saturday, Sunday, or legal holiday.

#### **County Opt Out Status**

A checkmark in this box signifies this county has opted out of participating in hearings conducted using electronic or other communication equipment.

#### **Requests for Hearings Conducted Using Electronic or Other Communication Equipment**

Rule 12D-9.026(2)(a), Florida Administrative Code provides:

The written request must:

1. Contain the petition number and parcel number.
2. Contain petitioner’s name.
3. Be sent to the value adjustment board email address listed on Form DR-481 that notices this hearing.
4. Contain an email address for response and follow up by the clerk.

If this notice sets forth a communication mode using audio visual technology you may request an in person hearing.

If this notice is for a telephone hearing you may request a hearing using audio visual technology or an in person hearing.

#### **Where to Send Request for Remote Hearing**

If this is a participating county, send your request to this email address: \_\_\_\_\_