



# Ohio Board of Tax Appeals

## Waiver of Appearance for a Board of Tax Appeals Hearing

BTA Case #: \_\_\_\_\_

BTA Case Name: \_\_\_\_\_

Party Submitting Waiver (Select One):      APPELLANT      APPELLEE

Hearing Date: \_\_\_\_\_

I, \_\_\_\_\_, wish to waive my appearance at the upcoming hearing at the Ohio Board of Tax Appeals (BTA). I will rely on the existing record from either the Board of Revision/Tax Commissioner/Municipal Board of Appeal, as applicable, for the BTA to make its determination.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

### Future Contact Information:

Address: \_\_\_\_\_

Address: \_\_\_\_\_

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

Phone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

\*Please note that Ohio Adm. Code 5717-1-15(F) requires a notice of waiver to be filed in advance of hearing and served on all other parties to the appeal.

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