



TAXPAYER REFUND REQUEST FORM

Fulton County Board of Commissioners
141 Pryor Street, SW, 10th Floor
Atlanta, GA 30303

All taxes on the parcel in question must be paid in full prior to making a refund request. Refund requests must be made within one (1) year or, in the case of taxes, three (3) years after the date of the payment of the tax or license fee ([Refer to O.C.G.A. 48-5-380](#)). Please fully complete this form.

Taxpayer Name: _____

Mailing Address: _____

Parcel Information (Information on parcel(s) to which refund is requested)

Parcel ID#(s) _____

Overpayment Date(s): _____

Amount Overpayment(s) Was Due: _____

Amount of Overpayment: _____

Physical Address of Parcel: _____

Summary Statement (Please provide factual or legal errors which have resulted in erroneous or illegal taxation.)

Was the property appealed to any of the below County offices:

Boards of Equalization

Board of Tax Assessors

Other: _____

Result: _____

Taxpayer Signature: _____ Date: _____

Please print and sign this document, and attach any additional information that you believe would be helpful to this Request Form, and submit by mail, email, or hand delivery to the Office of the Clerk to the Fulton County Board of Commissioners at the address listed below.

Request form shall be mailed to:

Fulton County Board of Commissioners

C/O Taxpayer Refund Request

141 Pryor Street, SW, 10th Floor

Atlanta, GA 30303

Clerk.Commissioners@fultoncountyga.gov