



# APPLICATION TO BOARD OF EQUALIZATION TO TESTIFY BY AFFIDAVIT

For official use only:

Rcvd by: \_\_\_\_\_

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

Fairbanks North Star Borough

907 Terminal Street ☆ P.O. Box 71267 ☆ Fairbanks, Alaska 99707-1267

(907) 459-1401 ☆ FAX (907) 459-1224

Complete and return to the Clerk's Office

<b>Your Information:</b>	
Name: _____	
Physical Address: _____	
Mailing Address: _____	
Phone Number: _____	Cell Phone Number: _____
E-mail Address: _____	
<b>Case Information:</b>	
BOE Case Number: _____	Hearing Date: _____
Property Account Number: _____	Situs Address: _____
Property Description: _____	
<b>Request to Testify by Affidavit:</b>	
<i>You must submit the affidavit containing your proposed testimony with this application. The affidavit will <u>not</u> be submitted as evidence unless and until the Chair grants your application. See the back side of this form for more information.</i>	

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_  
Applicant

For office use only:

Application to testify by affidavit is \_\_\_\_\_ Granted \_\_\_\_\_ Denied

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_  
Chair, Board of Equalization

INSTRUCTIONS FOR APPLICATION TO THE BOARD OF EQUALIZATION  
FOR PRE-HEARING DETERMINATION

This form is only for applications to testify by affidavit. When you complete this form, it is important that you limit your comments to those directly relevant to the determination. Any information provided regarding your argument about or position on the appeal will not be considered by the Board of Equalization chair when making the determination

Decisions on the pre-hearing application will be noticed by email or, if you do not have an email address, the Clerk's Office will call you. You must provide a legible email address and/or phone number and you must check your email (including junk mail) or your voice mail for the Chair's determination. Deadlines will not be waived for your failure to check your email, voice mail, for your failure to answer your phone, because there is no way for the Clerk to leave a message, or because the contact information you provided was not legible.

**PRE-HEARING DETERMINATION APPLICATION DEADLINE.** All pre-hearing determination applications must be received by the Clerk's Office no later than 5 working days prior to the hearing at which you wish to testify. The Clerk's Office will inform you of the Chair's decision no later than 2 working days before the scheduled hearing.

**TESTIMONY BY AFFIDAVIT DETERMINATION.** Applications to testify by affidavit must be received by the Clerk's Office no later than 5 working days before the scheduled hearing date. You must submit the affidavit containing your testimony at the time you submit this application form. The Clerk's Office will then provide your affidavit to opposing parties. The Chair will allow testimony by affidavit if no opposing party invokes the right to cross examination. If an opposing party invokes the right to cross-examination and submits questions relevant to the affidavit then the Chair will determine whether cross-examination is reasonably necessary to explore matters which contradict, modify, or explain the testimony contained in your affidavit. If the Chair determines that cross-examination is reasonably necessary then the Chair may reject your application to testify by affidavit. The Clerk's Office will notify you of the Chair's decision no less than 2 working days before the scheduled hearing date.

**REQUEST TO TESTIFY BY AFFIDAVIT OR TELEPHONICALLY.** You may submit concurrent applications to testify by affidavit and to testify telephonically. If you submit concurrent applications you must notify the Clerk's Office whether you prefer to testify by affidavit or telephonically. If you fail to indicate a preference and the Chair grants both applications then the Board of Equalization will provide for telephonic testimony only.

**AFFIDAVIT**

*for testimony to the Board of Equalization*

**Instructions:**  
1. Return this completed affidavit to the Clerk's Office with the application to the Board of Equalization to Testify by Affidavit  
2. This affidavit must be notarized. The Borough has notaries on staff or you may use your own notary.

STATE OF ALASKA )  
 ) ss.  
FOURTH JUDICIAL DISTRICT )

I, \_\_\_\_\_, being duly sworn and under oath, depose and state that the following is true and based on my own personal knowledge:

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*Signature*  
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*(Print Name and Address of Affiant)*

I hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the undersigned Notary Public in and for the State of Alaska, personally appeared \_\_\_\_\_, known to me to be that individual, and made his/her oath in due form of law that the matters and facts set forth in this Affidavit are true. In witness whereof, I hereunto set my hand and official seal.

(seal) \_\_\_\_\_  
Notary Public (signature)  
Printed name: \_\_\_\_\_  
My commission expires: \_\_\_\_\_

