## SETTLEMENT REVIEW REQUEST FOR SALES AND USE TAX AND SPECIAL TAXES AND FEE CASES

SETTLEMENT REVIEW REQUEST			
BUSINESS NAME		ACCOUNT NUMBER(S)	
TAXPAYER/FEEPAYER		CASE NUMBER(S)	
	Settlement Progr		of Equalization (BOE), you may request ls are a petition for redetermination, an
15 days prior to your oral hearing before	the Board Mem	bers. The Settlement Pro	t. You should submit your request at least ogram considers all Settlement Requests n with other BOE departments, sections,
request that the tax or fee amount in qu	uestion for the a	bove account(s) establish	ned on(DATE OF NOTICE, BILLING OR REFUND CLAIM)
for the period(s)		through	
(MONTH/D		tillough	(MONTH/DAY/YEAR)
□ and/or for the reasons detailed be	low (optional):		
understand settlement is discretionary BOE's Settlement Section staff will be fo			only those considered reasonable by the oval.
SIGNATURE	DATE		TELEPHONE NUMBER
PRINTED NAME	TITLE/CAPACITY		EMAIL ADDRESS

## NOTE:

The Settlement Program does not currently apply to disputes involving the jet fuel tax, motor vehicle fuel tax, fire prevention fee, or to insurance tax disputes. Also, with the exception of disputes pertaining to the Childhood Lead Poisoning Prevention Fee and the Occupational Lead Poisoning Prevention Fee, disputes involving Hazardous Substances Tax Law are administered by the Department of Toxic Substances Control.

You may email your proposal to settlement@boe.ca.gov, fax it to 1-916-323-3387, or mail it to: Assistant Chief Counsel, Settlement & Taxpayer Services Division MIC:87, California State Board of Equalization, PO Box 942879, Sacramento, CA 94279-0087.