

IN THE EQUALIZATION BOARD OF _____ COUNTY, ARKANSAS

AFFIDAVIT OF COMPLIANCE

I, _____, being first duly sworn, state that:

1. I am currently lawfully serving as an appointed member of the Equalization Board of _____ County, Arkansas, and I hereby swear to carry out the duties of my position in accordance with any and all state laws and procedures.

2. I have been provided with a copy of the Arkansas County Boards of Equalization Model Uniform Hearing Procedures established by the Arkansas Assessment Coordination Department, have reviewed and understand the procedures therein, and hereby swear to comply with all laws and procedures set forth therein. Such laws and procedures include, but are not limited to: the roles and responsibilities of equalization boards and individual members, the rights of parties before and during a hearing, the duty to remain fair and impartial, the requirement of pre-hearing notice and procedures, the duty to adopt and publish model uniform procedures, the order and procedure of hearings, the standard and burden of proof required in a hearing, the decision-making and notice of decision process of the equalization board, the prohibition against ex parte communications, the duty to avoid and disclose any conflicts of interest, and the duty to recuse under certain circumstances.

3. Further, I hereby swear to not knowingly violate any law or procedure set forth in the Model Uniform Hearing Procedures or otherwise.

4. I understand that should I knowingly violate a law or procedure regarding the conducting of county equalization board hearings before or during a hearing, I shall recuse from further participation in that hearing.

I understand that any false statement in this affidavit will subject me to penalties as set forth by law, including but not limited to, being removed from the equalization board.

Name, Member
Equalization Board of _____ County, Arkansas

STATE OF ARKANSAS

COUNTY OF _____

Member, _____, being first duly sworn under oath, presents that he/she has read and subscribed to the above and states that the information therein is true and correct.

SUBSCRIBED AND SWORN to before me this _____ day of _____, 2____.

Notary Public

My commission expires: _____