

## MOTION FOR CONTINUANCE

If you are unable to attend your hearing before PAAB on the date scheduled, complete this form, sign, and file it with PAAB. Upon receipt of this motion, PAAB will issue an order either granting or denying the request.

PAAB Docket No. \_\_\_\_\_

Parcel No. \_\_\_\_\_

\_\_\_\_\_  
Appellant,

vs.

\_\_\_\_\_  
Appellee.

Scheduled Hearing Date/Time: \_\_\_\_\_

I request a continuance of the hearing before PAAB for the following reason(s):

\_\_\_\_\_  
\_\_\_\_\_

Please list any dates you are unavailable in the next two (2) months:

\_\_\_\_\_

Signature: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

**This form must be filed with PAAB and sent to the opposing party.**

Copies to: \_\_\_\_\_

Property Assessment Appeal Board  
PO Box 10486 – Des Moines, IA 50306  
(515) 725-0338  
paab@iowa.gov