

TOOELE COUNTY CORPORATON CONTRACT # 15-07-16

Board of Equalization 47 So. Main, Suite #310 Tooele, UT 84074

Name: _	James	3 Ivje				
- Address	: 3176	Crest view C	ircle			
	Boun	I Ful, Utah	84010			
Telepho	one: (801)2	298-5303 hm 1	(801) 725-719	7 Cell		
I hereby agree to furnish my professional services to the Tooele County Board of Equalization (Board) to examine the appeals requested for hearing in accordance with the provisions of Section 59-2-1001(3), Utah Code, and other applicable policies and procedures. I will transmit my findings of each appeal to the Board within 5 business days of hearing the appeal (or 30 calendar days in the case of mutually agreed upon extenuating circumstances).						
I certify abilities	y that I am ful s upon my pro	ly qualified to perform fessional knowledge,	these duties, and waskills, and experien	vill perform ce.	them to the bes	t of my
Compe	ensation for th	ese services will be	\$45.00	per	hour	•
I acknowledge that I will perform the professional services outlined in this Agreement as an independent contractor and I am not deemed to be an employee of Tooele County. I will submit a monthly statement to Tooele County itemizing my services, and Tooele County will remit payment within 30 days of receiving each statement.						
	Sam	Signature			July 2	.5 ⁴ h 2015 ate
Board	of Equalizati	on approval by:				·
1	Marily	Signature	Meth		8-4/ D	-15 vate
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Hearing Officer Agreement for Board of Equalization