EF-305-A-R02-0809-53000410-1 BOE-305-A (P1) REV. 02 (08-09)

INFORMAL ASSESSMENT REVIEW

NOTE: To be completed and filed with the assessor's office by March 15.



Shanna White County Clerk-Recorder-Assessor

Weaverville, CA 96093 Phone: (530) 623-1257 Fax: (530) 623-8398 assessor@trinitycounty.org

P.O. Box 1255

IMPORTANT

		APPLICANT AND P	ROPERTY	INFORMA	TION	<u> </u>
NAME (LAST, F	FIRST, MIDDLE INITIAL)			ASSESSOR	'S PARCEL NUMBER	
MAILING ADDR	DESC			E-MAIL ADD	DECC	
MAILING ADDR	(ESS			E-WAIL ADD	RESS	
ITY		STATE ZIP CODE	DAYTIME TELEPHONE		ALTERNATE TELEPHONE FAX TELEPHONE	
OUR OPINION OF VALUE AS OF JANUARY 1		/ / /	CURRENT TAX BILL		SESSMENT	
OUR PURCHA	ASE PRICE	COMPARABLE MAR			(MONTH, DAY, YEAR) ATION	
SALE	ADDRE	ess	SALE DATE	PRIC	CE (if additional spa	DESCRIPTION ace is needed, use back of form)
1				/(
2			S	E		
3						
	•		TIFICATION			
I certify	(or declare) that the foregoing	g and all information hereor and complete to the be	n, including ar est of my know	ny accompar vledge and b	nying statements or docu elief.	uments, is true, correct
OWNER SIGNATURE				OWNER NAME		
IGENT SIGNATURE (IF APPLICABLE)				AGENT NAME (IF APPLICABLE)		
AGENT COMPANY NAME (IF APPLICABLE)				AGENT E-MAIL ADDRESS (IF APPLICABLE)		

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



INSTRUCTIONS

To protect your rights, you should file an Application for Changed Assessment with the clerk of the county board **NO LATER THAN [SEPTEMBER 15/NOVEMBER 30]** if: (1) you are unable to meet the March 15 filing deadline for this form; (2) you receive the assessor's response to your request for an assessment review before September 1 but disagree with the assessor's value; or (3) you do not receive the assessor's response to your request for an assessment review by September 1. If the board of supervisors in the county in which the real property is located has adopted a resolution in accordance with section 1603 of the Revenue and Taxation Code and if you receive the assessor's value conclusion resulting from your request for an assessment review after September 1, then the deadline for filing the Application for Changed Assessment will be either 60 days after the mailing of the response by the assessor or by December 31 of the year in which the application for Informal Assessment Review is filed, whichever is earlier. You should check with the clerk of the board of supervisors to determine if a section 1603 resolution has been adopted. The normal assessment appeals filing period is from JULY 2 through [SEPTEMBER 15/NOVEMBER 30]. You may request an Application for Changed Assessment after July 2 by calling the clerk of the board of supervisors at

