EF-305-A-R02-0809-55000165-1 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.



Kaenan Whitman Tuolumne County Assessor - Recorder

2 South Green Street, Third Floor Sonora, CA 95370 Phone: (209) 533-5535 Fax: (209) 533-5674

Email: assessor@tuolumnecounty.ca.gov

IMPORTANT

| | APPLICANT AND | PROPERTY | INFORMATI | ON | |
|---|--|------------|--------------------|---------------------|---------------------------------|
| ME (LAST, FIRST, MIDDLE INITIAL) | HI | | ASSESSOR'S F | PARCEL NUMBER | |
| ILING ADDRESS | | | E-MAIL ADDRE | SS | |
| Y | STATE ZIP CODE | DAYTIME TI | ELEPHONE | ALTERNATE TELEPHONE | FAX TELEPHONE |
| UR OPINION OF VALUE AS OF JANUAF UR PURCHASE PRICE | 3AA | DATE | RENT TAX BILL ASSE | ONTH, DAY, YEAR) | |
| | COMPARABLE M | _ | | ION | DESCRIPTION |
| SALE | ADDRESS | SALE DATE | PRICE | (if additional s | pace is needed, use back of for |
| 1 | | | VC | 기 | |
| 2 | | S | E | | |
| 3 | | | | | |
| | CE | RTIFICATIO | N | | |
| I certify (or declare) that the | foregoing and all information her and complete to the | | | | cuments, is true, correct |
| NER SIGNATURE | | OW | VNER NAME | | |
| ENT SIGNATURE (IF APPLICABLE) | | AG | ENT NAME (IF APPL | ICABLE) | |

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



