ASSESSMENT APPEAL APPLICATION

This form contains all of the requests for information that are required for filing an application for changed assessment. Failure to complete this application may result in rejection of the application and/or denial of the appeal. Applicants should be prepared to submit additional information if requested by the assessor or at the time of the hearing. Failure to provide information at the hearing the appeals board considers necessary may result in the continuance of the hearing or denial of the appeal. Do not

Non-refundable processing fee to be paid at time of filing. \$35.00 for residential property up to three (3) units \$100.00 for all other property types NOV 26 2024

RETURN TO: COUNTY OF LAKE CLERK OF THE BOARD 255 N.FORBES STREET LAKEPORT, CA. 95453

COUNTY OF LAKE

BOARD OF SUPERVISORS / ADMINISTRATIVE OFFICE

attach hearing evidence to this application.						APPLICATION NUMBER: Clerk Use Only		
 APPLICANT INFORMATION - PLEASE NAME OF APPLICANT (LAST, FIRST, MIDDLE INITIAL), BUT Lots of Realty LLC 	EMAIL ADDRESS							
MAILING ADDRESS OF APPLICANT /STREET ADDRESS	OR P. O. BOX)						(**	
CITY N Miami	STATE FL	ZIP CODE 33181	DAY	TIME TELEPHONE	ALTERNAT	E TELEPHONE	FAX TELEPHONE	
2. CONTACT INFORMATION - AGENT, A	TTORNEY,	OR RELATIVE	E OF A	PPLICANT if ap	plicable - (R	EPRESENTA	TION IS OPTIONAL)	
NAME OF AGENT, ATTORNEY, OR RELATIVE (LAST, FIR.	ST, MIDDLE INI	TIAL)			EMAIL ADDRE	SS		
William Marsden COMPANY NAME								
Parcel Technologies LLC								
CONTACT PERSON IF OTHER THAN ABOVE (LAST, FIRS	T, MIDDLE INTI	TAL)						
MAILING ADDRESS (STREET ADDRESS OR P. O. BOX) 2108 N Street #5257								
CITY Sacramento	STATE	ZIP CODE 95816	DAY	TIME TELEPHONE	ALTERNAT	E TELEPHONE	FAX TELEPHONE	
attorney as indicated in the Certification applicant is a business entity, the agent The person named in Section 2 above is enter in stipulati	t's authoriz hereby au	ation must be thorized to ac	signe ct as m	d by an officer o y agent in this a	or authorize application,	d employee o	f the business. ect assessor's records,	
SIGNATURE OF APPLICANT, OFFICER, OR AUTHORIZED	EMPLOYEE			TITLE	rner		DATE 11/26/2024	
ENTER APPLICABLE NUMBER FROM Y ASSESSOR'S PARCEL NUMBER		CE/TAX BILL ESSMENT NUMB	ER		FEE NUMBE	R		
012051060000								
ACCOUNT NUMBER 012051060000	TAX E	BILL NUMBER						
PROPERTY ADDRESS OR LOCATION					DOING BUS	INESS AS (DBA),	if appropriate	
15007 Spruce Grove Rd, Lower Lake, CA	95457							
PROPERTY TYPE M			_					
X SINGLE-FAMILY / CONDOMINIUM / TOV		DUPLEX		GRICULTURAL		☐ POSSE	SSORY INTEREST	
MULTI-FAMILY/APARTMENTS: NO. OF U	JNITS	_	∐ N	IANUFACTURED	HOME	☐ VACAN	T LAND	
COMMERCIAL/INDUSTRIAL			□ w	ATER CRAFT		☐ AIRCR	AFT	
BUSINESS PERSONAL PROPERTY/FIX	TURES		□ 0	THER:				
. VALUE	A. V	ALUE ON ROLL		B. APPLICANT'S	OPINION OF	VALUE C.	APPEALS BOARD USE ONLY	
LAND								
IMPROVEMENTS/STRUCTURES								
FIXTURES								
PERSONAL PROPERTY (see instructions)								
MINERAL RIGHTS								
TREES & VINES								
OTHER								
TOTAL	\$	702,270		\$53	30,000			
PENALTIES (amount or percent)								

5. TY	PE OF ASSESSMENT BEING APPEALED 🇹 Check only one. See	instructions for filing p	eriods
X	REGULAR ASSESSMENT - VALUE AS OF JANUARY 1 OF THE	CURRENT YEAR	
	SUPPLEMENTAL ASSESSMENT		
	*DATE OF NOTICE: ROLL YEAR:		
			☐ PENALTY ASSESSMENT
	*DATE OF NOTICE: **ROLL YEAR:		_
		roll year requires a sep	parate application
	ASON FOR FILING APPEAL (FACTS) See instruct		
	ou are uncertain of which item to check, please check "I. OTHER" and		n of your reasons for filing this application.
	e reasons that I rely upon to support requested changes in value are as DECLINE IN VALUE	TOIIOWS:	
	DECLINE IN VALUE ☑ The assessor's roll value exceeds the market value as of Janua	n. 1 of the current year	
	CHANGE IN OWNERSHIP	ry r or the current year.	
	1. No change in ownership occurred on the date of		
	2. Base year value for the change in ownership established on the change in ownership estab		is incorrect
	NEW CONSTRUCTION	ile date of	is incorrect.
	1. No new construction occurred on the date of		
	2. Base year value for the completed new construction establish		is incorrect.
		led on the date of	is incorrect.
	 3. Value of construction in progress on January 1 is incorrect. CALAMITY REASSESSMENT 		
	☐ Assessor's reduced value is incorrect for property damaged by i	misfortune or calamity	
	BUSINESS PERSONAL PROPERTY/FIXTURES. Assessor's value	•	d/or fixtures exceeds market value.
	☐ 1. All personal property/fixtures.	p pp	
	 2. Only a portion of the personal property/fixtures. Attach description 	otion of those items.	
F.	PENALTY ASSESSMENT		
	☐ Penalty assessment is not justified.		
G.	CLASSIFICATION/ALLOCATION		
	1. Classification of property is incorrect.		
	2. Allocation of value of property is incorrect (e.g., between land	-	ad and variancial after the
	APPEAL AFTER AN AUDIT. Must include description of each prope ☐ 1. Amount of escape assessment is incorrect.	rty, issues being appear	ed, and your opinion of value.
	2. Assessment of other property of the assessee at the location	is incorrect	
	OTHER		
	Explanation (attach sheet if necessary)		
	RITTEN FINDINGS OF FACTS (\$)		
	Are requested. Are not requested.		
8. TH	S APPLICATION IS DESIGNATED AS A CLAIM FOR REFUND See	instructions.	
	Yes 🗵 No		
	CERTIFICAT	ION	
l certii	fy (or declare) under penalty of perjury under the laws of the State of C	alifornia that the foregoing	and all information hereon, including any
	ppanying statements or documents, is true, correct, and complete to the		
	rty or the person affected (i.e., a person having a direct economic intere authorized by the applicant under item 2 of this application, or (3) an a		
Numb			
SIGNAT	URE (Use Blue Pen - Original signature required on paper-filed application)	SIGNED AT (CITY, STATE)	DATE
	wall the	Sacramento, CA	11.56-54
NAME (I	Please Print) William Marsden		
FILING S	STATUS (IDENTIFY RELATIONSHIP TO APPLICANT NAMED IN SECTION 1)		
V		DOMESTIC DARKET	NUID
.	OWNER AGENT ATTORNEY SPOUSE REGISTERED	DOMESTIC PARTNER	CHILD PARENT PERSON AFFECTED
	CORPORATE OFFICER OR DESIGNATED EMPLOYEE		



COUNTY OF LAKE CLERK OF THE BOARD OF SUPERVISORS

Courthouse – 255 North Forbes Street Lakeport, CA 95453 Telephone (707) 263-2368 Fax (707) 263-2207

COUNTY OF LAKE AGENT'S AUTHORIZATION FORM

(A copy to be filed with each Assessment Appeal Application)

OWNER/ PROPERTY INFORMATION

Property Owner's NameRobert Bowling
Property Owner's Mailing Address
City/State/ZIP
Property Address15007 Spruce Grove Rd
City/State/ZIPLower Lake, CA 95457
Assessor's Parcel Number (APN)0120510600000
AGENT'S INFORMATION
Agent's Name & Company William Marsden, Parcel Technologies LLC
Agent's Mailing Address 2108 N Street #5257
City/State/ZIPSacramento, CA 95816
Phone N
Email: bi
AUTHORIZATION
The above named agent is hereby authorized to act as the agent for the property listed above and may sign and file applications, inspect Assessor's records, enter into stipulation, and otherwise settle issues relating to this property for the 2012/2013 tax year. Agent will provide client with a copy of the appeals application for the above Parcel Number(s). The above named agent also has full authority to handle all assessment matters with the Office of the Assessor and/or the Lake County Local Board of Equalization.
Property Owner's Signature Kelul Bading
Property Owner's Printed NameRobert Bowling
Company/Ownership (if applicable) Lots of Realty, LLC
Title (if applicable)Principal