

## HEARING DATE CONFIRMATION NOTICE

THIS PORTION MUST BE RETURNED

Application No(s): 07-2023 Assessee/Owner: Charles Bellig Hearing Date: May 14, 2024 @10:00 A.M.

APN(s): 044-182-080-000

## YOU MUST COMPLETE AND RETURN THIS PORTION AT LEAST 21 DAYS PRIOR TO THE HEARING DATE

Yes, I (or my agent) will be present for my scheduled hearing.

I am unable to attend on the date specified. The request must be st PROTAX LLC -Debbie Opfer hearing date and accompanied by the signed extension form below Clerk will contact you to reschedule your hearing. Please withdraw my appeal(s). I do not intend to appear at my scho

Appeals Coordinator debbieo@protaxllc.com 13029 Danielson St., Ste. 200

Poway, CA 92064

(858) 679-7221 Fax: (858) 679-1563

Signature: Owner/Agent

Application No(s): 07-2023

Daytime Phone Number

Hearing Date: May 14, 2024 @10:00 A.M.

## IT IS IMPERATIVE THAT YOU CONFIRM YOUR INTENTION TO APPEAR. FAILURE TO APPEAR WITHOUT NOTICE MAY RESULT IN YOUR APPEAL BEING DENIED. (PLEASE RETURN WHOLE PAGE)

## LAKE COUNTY LOCAL BOARD OF EQUALIZATION **EXTENSION FOR TIME OF HEARING**

Assessee/Owner: Charles Bellig	APN(s): 044-182-080-000
1604c, the time for the hearing and determination indefinitely; provided, however, that upon written no period in which the Local Board of Equalization is red	nat, in accordance with Revenue and Taxation Code Section of the above-referenced application(s) shall be extended otice of my intent to terminate such extension, the two-year quired to conduct a hearing and make a final determination on the torun until 120 days after delivery of such written notice on
5/3/24	
Date signed	PROTAX LLC – Debbie Opfer
	Appeals Coordinator debbieo@protaxllc.com 13029 Danielson St., Ste. 200
Company/Firm Name (Agent's)	Poway, CA 92064
	(858) 679-7221 Fax: (858) 679-1563
Mailing Address	City, State, ZIP
Daytime Phone Number	Alternate Telephone Number
Please return this form to: LAKE COUNTY CLERK OF THE	

**255 NORTH FORBES STREET** 

LAKEPORT, CA 95453