BOE-305-AH (P1) REV. 11 (05-22)

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 attach hearing evidence to this application.**

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

RETURN TO: COUNTY OF LAKE CLERK OF THE BOARD 255 N.FORBES STREET

COUNTY OF LAKE BOARD OF SUPERVISORS / ADMINISTRATIVE OFFICE

the appeals board considers necessary may result in the LAKEPORT, CA, 95453 continuance of the hearing or denial of the appeal. Do not APPLICATION NUMBER: Clerk Use Only attach hearing evidence to this application. 1. APPLICANT INFORMATION - PLEASE PRINT NAME OF APPLICANT (LAST, FIRST, MIDDLE INITIAL), BUSINESS, OR TRUST NAME MCTUTYPE GIQVIVI R DDRESS OR P. O. BOX **FAX TELEPHONE** 2. CONTACT INFORMATION - AGENT, ATTORNEY, OR RELATIVE OF APPLICANT if applicable - (REPRESENTATION IS OPTIONAL) NAME OF AGENT, ATTORNEY, OR RELATIVE (LAST, FIRST, MIDDLE INITIAL) EMAIL ADDRESS COMPANY NAME CONTACT PERSON IF OTHER THAN ABOVE (LAST, FIRST, MIDDLE INTITAL) MAILING ADDRESS (STREET ADDRESS OR P. O. BOX) CITY STATE ZIP CODE DAYTIME TELEPHONE ALTERNATE TELEPHONE FAX TELEPHONE AUTHORIZATION OF AGENT AUTHORIZATION ATTACHED The following information must be completed (or attached to this application - see instructions) unless the agent is a licensed California attorney as indicated in the Certification section, or a spouse, child, parent, registered domestic partner, or the person affected. If the applicant is a business entity, the agent's authorization must be signed by an officer or authorized employee of the business. The person named in Section 2 above is hereby authorized to act as my agent in this application, and may inspect assessor's records, enter in stipulation agreements, and otherwise settle issues relating to this application. SIGNATURE OF APPLICANT, OFFICER, OR AUTHORIZED EMPLOYEE TITLE DATE 3. PROPERTY IDENTIFICATION INFORMATION No Is this property a single-family dwelling that is occupied as the principal place of residence by the owner? ENTER APPLICABLE NUMBER FROM YOUR NOTICE/TAX BILL ASSESSOR'S PARCEL NUMBER ASSESSMENT NUMBER FEE NUMBER 001-031-080 ACCOUNT NUMBER TAX BILL NUMBER PROPERTY ADDRESS OR LOCATION 29 TK DOING BUSINESS AS (DBA), if appropriate PROPERTY TYPE ☐ SINGLE-FAMILY / CONDOMINIUM / TOWNHOUSE / DUPLEX AGRICULTURAL ☐ POSSESSORY INTEREST MULTI-FAMILY/APARTMENTS: NO. OF UNITS MANUFACTURED HOME ☐ VACANT LAND ☐ COMMERCIAL/INDUSTRIAL ☐ WATER CRAFT ☐ AIRCRAFT BUSINESS PERSONAL PROPERTY/FIXTURES OTHER: 4. VALUE 2022 A. VALUE ON ROLL B. APPLICANT'S OPINION OF VALUE C. APPEALS BOARD USE ONLY 169,875 LAND IMPROVEMENTS/STRUCTURES **FIXTURES** PERSONAL PROPERTY (see instructions) MINERAL RIGHTS TREES & VINES OTHER TOTAL PENALTIES (amount or percent)

BOE-305-AH (P2) REV. 11 (05-22) 5. TYPE OF ASSESSMENT BEING APPEALED | Check only one. See instructions for filing periods ☐ REGULAR ASSESSMENT – VALUE AS OF JANUARY 1 OF THE CURRENT YEAR ☐ SUPPLEMENTAL ASSESSMENT *DATE OF NOTICE: **ROLL YEAR:** ☐ ROLL CHANGE **W** ESCAPE ASSESSMENT *Must attach copy of notice or bill, where applicable **Each roll year requires a separate application 6. REASON FOR FILING APPEAL (FACTS) See instructions before completing this section. If you are uncertain of which item to check, please check "I. OTHER" and provide a brief explanation of your reasons for filing this application. The reasons that I rely upon to support requested changes in value are as follows: A. DECLINE IN VALUE ☐ The assessor's roll value exceeds the market value as of January 1 of the current year. B. CHANGE IN OWNERSHIP □ 1. No change in ownership occurred on the date of 1. No change in ownership occurred on the date of $\frac{11-21-2024}{6456 \text{ Ver}}$ is incorrect. C. NEW CONSTRUCTION 1. No new construction occurred on the date of 2. Base year value for the completed new construction established on the date of ☐ 3. Value of construction in progress on January 1 is incorrect. D. CALAMITY REASSESSMENT Assessor's reduced value is incorrect for property damaged by misfortune or calamity. E. BUSINESS PERSONAL PROPERTY/FIXTURES. Assessor's value of personal property and/or fixtures exceeds market value. 1. All personal property/fixtures. 2. Only a portion of the personal property/fixtures. Attach description 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 and improvements). H. APPEAL AFTER AN AUDIT. Must include description of each property, issues being appealed, and your opinion of value. 1. Amount of escape assessment is incorrect. 2. Assessment of other property of the assessee at the location is incorrect. I. OTHER Explanation (attach sheet if necessary) 7. WRITTEN FINDINGS OF FACTS (\$ Are requested. Are not requested. 8. THIS APPLICATION IS DESIGNATED AS A CLAIM FOR REFUND See instructions. Yes **CERTIFICATION** I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief and that I am (1) the owner of the property or the person affected (i.e., a person having a direct economic interest in the payment of taxes on that property - "The Applicant"), (2) an agent authorized by the applicant under item 2 of this application, or (3) an attorney licensed to practice law in the State of California, State Bar Number , who has been retained by the applicant and has been authorized by that person to file this application. SIGNATURE (Use Blue Per

CPlease Print)

GOVIN MCTUTYPE

GISTATUS (IDENTIFY RELATIONSHIP TO APPLICANT NAMED IN SECTION 1)

WOWNER GENT ATTORNEY SPOUSE REGISTERED DOMESTIC PARTNER CHILD PARENT PERSON AFFECTED

CORPORATE OFFICER OR DESIGNATED EMPLOYEE

Attachment I

The reasons that I rely upon to support requested changes, and preserve these issues for a higher court, are as follows:

- I. The base year (2015) value (which was utilized for the Escaped Assessments (for 2017-2025) were calculated incorrectly, based on the following undisputed facts:
 - Ind-locked parcel and has no legal easement. All of the comparables used by the Assessor's Office Cincluded, but not limited to, parcel numbers: 001-021-020, 002-010-130, 002-012-390) possessed legal easements.
 - A recent Appraisal Report by John Rensen (who worked as the Mendocino County Assessor for 28 yrs.) states, the unlike the other comparables in the report, this land has no spring or well, and was therefore appraised at \$ 129,000.

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3. The improvements on the property were overvalued. Chiefty amoung these, was the mobile home, which the assessor's office valued at \$255,000 in 2003. Such inaccurate valuations are due to the fact that no one from the assessors office has ever visited the property. Conversely, the Appraisor looked at all of the buildings and valued them at less than \$10,000. The appraisal report (complete with pictures of the structures) are on file with the Assessor's Office. Since the submition of this report, the Assessor's Office has lowered the value of these structured to \$23,562 (which still overvalues these improvements, but has made no attempt to visit, the, property and assess it's actual value,

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