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 LAKEPORT, CA. 95453 NOV **26** 2024

COUNTY OF LAKE BOARD OF SUPERVISORS / ADMINISTRATIVE OFFICE

attach hearing evidence to this application. 1. APPLICANT INFORMATION - PLEASE PRINT						APPLICATION NUMBER: Clerk Use Only 32 - 2024			
MAILING ADDRESS OF APPLICANT (STREET ADDRESS 1680 NE 135th St	OR P. O. BOX)								
CITY N Miami	STATE FL	ZIP CODE 33181	ΓΔV	TIME TEI EDHONE	ALTERNATE (TELEPHONE	FAX TELEPHONE		
2. CONTACT INFORMATION - AGENT, A	TTORNEY,	OR RELATIVE	OF A	PPLICANT if ap	plicable - (RE	PRESENT	ATION IS OPTIONAL)		
NAME OF AGENT, ATTORNEY, OR RELATIVE (LAST, FIR	ST, MIDDLE INI	TIAL)			EMAIL ADDRESS	S			
William Marsden COMPANY NAME					J	7,			
Parcel Technologies LLC						*			
CONTACT PERSON IF OTHER THAN ABOVE (LAST, FIRS	ST, MIDDLE INTI	TAL)							
MAILING ADDRESS (STREET ADDRESS OR P. O. BOX) 2108 N Street #5257									
CITY	STATE	ZIP CODE 95816	DAY	TIME TELEPHONE	ALTERNATE (TELEPHONE	FAX TELEPHONE		
The following information must be compattorney as indicated in the Certification applicant is a business entity, the agent The person named in Section 2 above is	n section, o t's authoriz	or a spouse, c ation must be	hild, p signe	arent, registere d by an officer	d domestic p or authorized	artner, or employee	the person affected. If the of the business.		
enter in stipulat	ion agreem			settle issues re			n.		
SIGNATURE OF APPLICANT, OFFICER, OR AUTHORIZED EMPLOYEE Robert Founing				Homeowner DATE 11/26/202			11/26/2024		
☐ Yes ☑ No Is this property a single	OUR NOTI	CE/TAX BILL		пе рппсіраї ріасе					
ASSESSOR'S PARCEL NUMBER 012050090000	ASSE	ESSMENT NUMB	ER		FEE NUMBER				
ACCOUNT NUMBER 012050090000	TAX	BILL NUMBER							
PROPERTY ADDRESS OR LOCATION					DOING BUSIN	ESS AS (DB	A), if appropriate		
14478 Noble Ranch Rd, Lower Lake, CA	95457						*		
PROPERTY TYPE M				·		_			
SINGLE-FAMILY / CONDOMINIUM / TO\		DUPLEX	_	AGRICULTURAL		_	SESSORY INTEREST		
MULTI-FAMILY/APARTMENTS: NO. OF	UNITS	_		MANUFACTURED	HOME	☐ VAC	ANT LAND		
COMMERCIAL/INDUSTRIAL			∐ V	VATER CRAFT		AIR(CRAFT		
BUSINESS PERSONAL PROPERTY/FIX	TURES			THER:					
I. VALUE	A. V	ALUE ON ROLL		B. APPLICANT'S	OPINION OF VA	ALUE	C. APPEALS BOARD USE ON		
LAND									
IMPROVEMENTS/STRUCTURES									
FIXTURES									
PERSONAL PROPERTY (see instructions)									
MINERAL RIGHTS									
TREES & VINES									
OTHER									
TOTAL	\$	572,220		\$3	79,000				
PENALTIES (amount or percent)									

5. TYPE OF ASSESSMENT BEING APPEALED 🗹 Check only one. See	instructions for filing periods							
REGULAR ASSESSMENT - VALUE AS OF JANUARY 1 OF THE								
☐ SUPPLEMENTAL ASSESSMENT								
*DATE OF NOTICE: ROLL YEAR:								
	Y REASSESSMENT PENALTY ASSESSMENT							
*DATE OF NOTICE: **ROLL YEAR:								
	roll year requires a separate application							
6. REASON FOR FILING APPEAL (FACTS) See instruction								
If you are uncertain of which item to check, please check "I. OTHER" and p								
The reasons that I rely upon to support requested changes in value are as A. DECLINE IN VALUE	iollows.							
★ The assessor's roll value exceeds the market value as of Januar	v 1 of the current year							
B. CHANGE IN OWNERSHIP	y Tortile current year.							
1. No change in ownership occurred on the date of								
2. Base year value for the change in ownership established on the date of is incorrect.								
C. NEW CONSTRUCTION	is incorrect.							
1. No new construction occurred 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 m 	pisfortune or calamity							
E. BUSINESS PERSONAL PROPERTY/FIXTURES. Assessor's value of personal property and/or fixtures exceeds market value.								
☐ 1. All personal property/fixtures.	or percental property and/or includes exceeded market value.							
	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 proper	ty, 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 I. OTHER 	s incorrect.							
Explanation (attach sheet if necessary)								
7. WRITTEN FINDINGS OF FACTS (\$ per) Are requested. Are not requested.								
8. THIS APPLICATION IS DESIGNATED AS A CLAIM FOR REFUND See i	nstructions.							
LI TES MINO								
CERTIFICATION	ON							
I certify (or declare) under penalty of perjury under the laws of the State of Ca accompanying statements or documents, is true, correct, and complete to the								
property or the person affected (i.e., a person having a direct economic interes	t 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 at								
	as been authorized by that person to file this application. SIGNED AT (CITY STATE) DATE							
SIGNATURE (Use Blue Pen - Original signature required on paper-filed application)	SIGNED AT (CITY, STATE) Sacramento, CA DATE 11. Z6. Z 4							
NAME (Please Print)								
William Marsden								
FILING STATUS (IDENTIFY RELATIONSHIP TO APPLICANT NAMED IN SECTION 1)								
✓ OWNER X AGENT ATTORNEY SPOUSE REGISTERED	DOMESTIC PARTNER							
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 Address14478 Noble Ranch Rd
City/State/ZIPLower Lake, CA 95457
Assessor's Parcel Number (APN)0120500900000
AGENT'S INFORMATION
Agent's Name & Company
Agent's Mailing Address 2108 N Street #5257
City/State/ZIPSacramento, CA 95816
Phone Number:
Email:
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
Property Owner's Printed NameRobert Bowling
Company/Ownership (if applicable)Lots of Realty, LLC
Title (if applicable)Principal