

**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 for residential property up to three (3) units**  
**\$100 for all other property types**

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

**RECEIVED**  
**NOV 30 2020**  
**COUNTY OF LAKE**  
**BOARD OF SUPERVISORS**

APPLICATION NUMBER: Clerk Use Only

59-2020

EMAIL ADDRESS

amaron@sbglobal.net

**1. APPLICANT INFORMATION - PLEASE PRINT**

NAME OF APPLICANT (LAST, FIRST, MIDDLE INITIAL), BUSINESS, OR TRUST NAME

MAROUN AHAN L

MAILING ADDRESS OF APPLICANT (STREET ADDRESS OR P. O. BOX)

6970 ADOBE CREEK ROAD

CITY	STATE	ZIP CODE	DAYTIME TELEPHONE	ALTERNATE TELEPHONE	FAX TELEPHONE
KESEYVILLE	CA	95451	(707) 263-0790	( )	( )

**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 INITIAL)

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**

☒ Yes ☐ 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
	007-010-130-000	007-010-130-000
ACCOUNT NUMBER	TAX BILL NUMBER	

PROPERTY ADDRESS OR LOCATION

6970 ADOBE CREEK RD. KESEYVILLE CA 95451

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**

	A. VALUE ON ROLL	B. APPLICANT'S OPINION OF VALUE	C. APPEALS BOARD USE ONLY
LAND	142.845	UNKNOWN	
IMPROVEMENTS/STRUCTURES	143.014		
FIXTURES			
PERSONAL PROPERTY (see instructions)			
MINERAL RIGHTS			
TREES & VINES			
OTHER			
TOTAL			
PENALTIES (amount or percent)			

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

**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 ☐ ESCAPE ASSESSMENT ☐ CALAMITY REASSESSMENT ☐ PENALTY ASSESSMENT

\*DATE OF NOTICE: \_\_\_\_\_ \*\*ROLL YEAR: \_\_\_\_\_

\*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 \_\_\_\_\_.☐ 2. Base year value for the change in ownership established on the date of \_\_\_\_\_ 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 \_\_\_\_\_ is incorrect.☐ 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)*I DON'T AGREE WITH THE ASSESSMENT.***7. WRITTEN FINDINGS OF FACTS ( \$ 00.00 per \_\_\_\_\_ )**☐ Are requested. ☐ Are not requested.**8. THIS APPLICATION IS DESIGNATED AS A CLAIM FOR REFUND** *See instructions.*☐ Yes ☒ No**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 Pen - Original signature required on paper-filed application)

SIGNED AT (CITY, STATE)

DATE

NAME (Please Print)

*ALLAN L. MAROUN**LAKEPORT**11/30/2020*

FILING STATUS (IDENTIFY RELATIONSHIP TO APPLICANT NAMED IN SECTION 1)

☒ ☒ OWNER ☐ AGENT ☐ ATTORNEY ☐ SPOUSE ☐ REGISTERED DOMESTIC PARTNER ☐ CHILD ☐ PARENT ☐ PERSON AFFECTED☐ CORPORATE OFFICER OR DESIGNATED EMPLOYEE

LAKE COUNTY 2020 - 2021 PROPERTY TAX BILL  
Barbara C. Ringen, Treasurer - Tax Collector  
255 N. Forbes Street, Room 215 Lakeport, CA 95453 (707) 263-2234  
SECURED TAX ROLL FOR FISCAL YEAR JULY 1, 2020 - JUNE 30, 2021

10/20/2020  
1:57:54PM

PROPERTY INFORMATION - TAX YEAR: 2020			IMPORTANT MESSAGES
ASMT NUMBER:	007-010-130-000	TAX RATE AREA: 056-026	Original bill date 09/16/2020 Delinquent taxes were redeemed 04/10/2020 %S %S ***** SUPPLEMENTAL TAX BILLS ARE NOT MAILED TO LENDERS *****  2020-2021
FEE NUMBER:	007-010-130-000	ACRES: 3.44	
LOCATION:	6970 ADOBE CREEK RD		
ASSESSED OWNER:	MAROUN ALLAN L		
MAROUN ALLAN L 6970 ADOBE CREEK ROAD KELSEYVILLE CA 95451			

COUNTY VALUES, EXEMPTIONS AND TAXES				
PHONE #S	VALUE DESCRIPTION	PRIOR	CURRENT	THIS BILL
ASSESSOR: (707) 263-2332	LAND		142,865	142,865
VALUE/EXEMPTION	STRUCTURAL IMPROVEMENTS		143,014	143,014
ADDRESS CHANGES	NET TAXABLE VALUE			285,879
AUDITOR: (707) 263-2311				
TAX RATES/REFUNDS				
COLLECTOR: (707) 263-2234				
PAYMENT INFORMATION				

VALUES X TAX RATE PER \$100 1.000000 \$ 2,858.78

VOTER APPROVED TAXES, TAXING AGENCY DIRECT CHARGES AND SPECIAL ASSESSMENTS							
PHONE #S	CODE	DESCRIPTION	ASSESSED VALUES	X	TAX RATE PER \$100	=	AGENCY TAXES
(707) 279-1511	02100	KELSEYVILLE UNIFIED SCHOOL BONDS	285,879		.010650		\$30.44
(707) 279-1511	02110	KELSEYVILLE UNIFIED SCHOOL BONDS 2016	285,879		.051810		\$148.12
(707) 468-3067	06200	MENDOCINO COMM COLLEGE BOND	285,879		.023000		\$65.76
PHONE #S	DESCRIPTION	DIR CHRG	PHONE #S	DESCRIPTION	DIR CHRG	PHONE #S	DESCRIPTION
(800) 273-5167	LAKE CO VCD & MOSQUITO C	\$15.68	(707) 279-4268	FIRE KELSEYVILLE	\$19.00		

AGENCY TAXES \$244.32  
DIRECT CHARGES \$34.68  
AGENCY TAXES + DIRECT CHARGES + FEES + PENALTY + COST + DELINQUENT PENALTIES \$279.00

1ST INSTALLMENT \$1,568.89 DELINQUENT AFTER 12/10/2020	2ND INSTALLMENT \$1,568.89 DELINQUENT AFTER 4/10/2021	TOTAL TAXES \$3,137.78
---	--	------------------------

LAKE COUNTY SECURED PROPERTY TAXES - 2ND INSTALLMENT PAYMENT STUB		
ASMT NUMBER:	007-010-130-000	2020
ORIG ASMT:	007-010-130-000	
FEE NUMBER:	007-010-130-000	
LOCATION:	6970 ADOBE CREEK RD	
CURRENT OWNER:	MAROUN ALLAN L	
	6970 ADOBE CREEK ROAD	
	KELSEYVILLE CA 95451	

MAKE CHECK PAYABLE TO:  
Lake County Tax Collector  
255 N. Forbes Street, Room 215  
Lakeport, CA 95453

2020-2021 2ND

IF PAID BY 4/10/2021 \$1,568.89

DELINQUENT AFTER 4/10/2021 (INCLUDES 10% PENALTY OF \$156.88 AND \$20.00 COST) \$1,745.77

007010130000520206000001568898200000174577720206 04102021

LAKE COUNTY SECURED PROPERTY TAXES - 1ST INSTALLMENT PAYMENT STUB		
ASMT NUMBER:	007-010-130-000	2020
ORIG ASMT:	007-010-130-000	
FEE NUMBER:	007-010-130-000	
LOCATION:	6970 ADOBE CREEK RD	
CURRENT OWNER:	MAROUN ALLAN L	
	6970 ADOBE CREEK ROAD	
	KELSEYVILLE CA 95451	

MAKE CHECK PAYABLE TO:  
Lake County Tax Collector  
255 N. Forbes Street, Room 215  
Lakeport, CA 95453

2020-2021 1ST

IF PAID BY 12/10/2020 \$1,568.89

DELINQUENT AFTER 12/10/2020 (INCLUDES 10% PENALTY OF \$156.88) \$1,725.77  
TO PAY TOTAL TAXES, RETURN BOTH STUBS BY 12/10/2020 \$3,137.78

007010130000520206000001568898100000172577920206 12102020