

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**JUL 24 2019**

COUNTY OF LAKE
BOARD OF SUPERVISORS

APPLICATION NUMBER: Clerk Use Only**11-2019****1. APPLICANT INFORMATION - PLEASE PRINT**

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

EMAIL ADDRESS

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

CITY **Phillipsville** STATE **CA** ZIP CODE **95559** DAYTIME TELEPHONE **(707) 223-2226** ALTERNATE TELEPHONE () 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 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

ACCOUNT NUMBER

TAX BILL NUMBER

PROPERTY ADDRESS OR LOCATION

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

17,000.00**1,700.00**

IMPROVEMENTS/STRUCTURES

FIXTURES

PERSONAL PROPERTY (see instructions)

MINERAL RIGHTS

TREES & VINES

OTHER

TOTAL

17,000.00**1,700.00**

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: 7/4/2019 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)Assessed at 406% of Purchase Price**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)

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 EMPLOYEEChris West
Equity Trust Company Custodian FBO Christopher Martin West IRA



IRA

County of Lake

Richard A. Ford, Assessor-Recorder

255 N. Forbes Street, Room 223
Lakeport, Ca 95453 (707) 263-2302

DE-67-B(P1) Rev. 02 (08-08)

NOTICE OF SUPPLEMENTAL ASSESSMENT

DATE OF NOTICE: 07/04/2019

Parcel Number: 043-681-030-000

Doc Num: 2018R0014936

Asmt Num: 990-089-374-000

Orig Asmt: 043-681-030-000

Situs Address: 4883 IROQUOIS TR KELSEYVILLE CA

Comments:

EQUITY TRUST COMPANY
P O BOX 185
PHILLIPSVILLE CA 95559

Date of Change of Ownership or Completion of New Construction: 11/26/2018

One or more supplemental assessments have been determined for the property shown above. Supplemental assessments are determined in accordance with the California Constitution, article XIII A, which generally requires a current market value reassessment of real property that has either undergone a change in ownership or is newly constructed.

As shown below, a supplemental assessment represents the difference between the property's "new base year value" (for example, current market value) and its existing taxable value. If the change in ownership or completion of new construction occurred between January 1 and May 31, two supplemental assessments are issued: one for the difference between the new base year value and the taxable value appearing on the current assessment roll, and another for the difference between the new base year value and the taxable value that will appear on the assessment roll being prepared.

If a supplemental assessment is a negative amount, the county auditor will make a refund of a portion of the taxes paid on assessments made on the current roll, or the roll being prepared, or both. A copy of the assessment roll is available for inspection by interested parties during regular office hours.

YOUR RIGHT TO AN INFORMAL REVIEW

If you believe the assessment is incorrect, you have the right to an informal review with the Assessor's staff. You may contact the Assessor's Office for an informal review at (707) 263-2302


	CURRENT ROLL 2018 - 2019			ROLL BEING PREPARED 0 - 0		
	Existing Value	New Value	Supplemental Assessment	Existing Value	New Value	Supplemental Assessment
Land	8,655	7,000	-1,655	0	0	0
Improvements	0	0	0	0	0	0
Growing	0	0	0	0	0	0
Fixtures	0	0	0	0	0	0
Personal Prop./ Mobile Home	0	0	0	0	0	0
Homesite	0	0	0	0	0	0
TAXABLE VALUE	8,655	7,000	-1,655	0	0	0
Exemptions						
Homeowners	0	0	0	0	0	0
Other	0	0	0	0	0	0
NET TOTAL	8,655	7,000	-1,655	0	0	0

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

Comparable Lake County Sales

Comments	Address	APN	Price Paid
filtered lake view ^{down slope}	10898 Northslope Dr, CLRCA	043-472-110-000	\$3,000.00
Small filtered lake view ^{up slope}	10479 Boren Begate Dr, CLRCA	043-434-100-000	\$3,300.00
lake view (nearly level)	4587 Hawaiia Way, CLRCA	043-403-100-000	\$3,500.00
Small filtered lake view ^{up slope}	10493 Boren Begate Dr, CLRCA	043-434-110-000	\$2,000.00
filtered lake view	4883 Iroquois Tr, CLRCA	043-681-030-000	\$1,700.00
Small filtered lake view	5355 Monterey Pl, CLRCA	043-614-150-000	\$2,000.00
No lake view	10161 El Capitan Way, CLRCA	043-701-380-000	\$1,750.00
No lake view, Perc	4696 Iroquois Tr, CLRCA	043-672-010-000	\$1,750.00
filtered lake view	4839 Iroquois Tr, CLRCA	043-674-080-000	\$2,000.00
lake view	4917 Iroquois Tr, CLRCA	043-681-050-000	\$2,000.00
Big lake view	10902 Northslope Dr, CLRCA	043-472-120-000	\$4,000.00
Small filtered lake view ^{up slope}	2933 Lakeridge Dr, Nice	031-113-690-000	\$2,600.00
distant lake view	4231 Foothill Dr, Lucerne	034-845-090-000	\$3,500.00 Realt
0.29 acre	17237 Cache Creek Rd, ^{Spring Valley}	062-441-010-000	\$3,000.00 Real
No lake view	10100 Ed Dorado Way, CLRCA	043-722-160-000	\$10k back taxes
filtered lake view	9528 Fairway Dr, CLRCA	430-132-030-000	\$2,500.00
filtered lake view	10709 Hawaiia Pl, CLRCA	043-383-070-000	\$2,000.00
4ac lake view	9612 Marmot Way, CLRCA	043-733-130-000	\$3,000.00
No lake view at ground	10691 Sunset Ridge Dr, CLRCA	043-522-130-000	\$2,000.00
No lake view	10700 Sunset Ridge Dr, CLRCA	043-521-070-000	\$1,200.00

The above information is provided to the best of my recollection from the price level paid, it is obvious that my max paid was \$4,000 for these types of lots. Most commonly, I see \$2,000 or less. These lots were offered to me at these prices. In most ^{for all} cases, the sellers, which included the HOA (CLRCA), contacted me first.


Chris Weston 4/27/201

County Of Lake
Lakeport, California

Receipt No. 1373304

Department: 1012

Date 7-24-19

Received of Chris Weston (IRA)

\$ 35.00

thirty-five & 00/100

Dollars

Detail of Deposit Assessment Appeal # 043-681-630-880

CASH ☐

CHECK ☒ # 1068021

OTHER ☐

By May Beard

TO VERIFY AUTHENTICITY, SEE REVERSE SIDE FOR DESCRIPTION OF THE 11 SECURITY FEATURES

Clitbank, N.A.
San Francisco, CA 940104
90-7118/3211

CHECK 1068021

Equity Trust Company
1 Equity Way
Westlake, OH 44145

July 10, 2019

EXACTLY * \$35 * DOLLARS AND 00/100 CENTS

\$35.00

Pay
To the Order of: County of Lake

County of Lake
% Chris Weston
P.O. Box 185
Phillipsville, CA 95559

VOID AFTER 180 DAYS
AUTHORIZED SIGNATURE



⑈1068021⑈ ⑆321171184⑆ 204042279⑈