

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 09 2019

**COUNTY OF LAKE
BOARD OF SUPERVISORS**

APPLICATION NUMBER: Clerk Use Only

05-2019

1. APPLICANT INFORMATION - PLEASE PRINT

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

Weston, Christopher M Trustee

EMAIL ADDRESS

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

P.O. Box 185

Phillipsville

CA 95559

(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

043-472-120-000

ASSESSMENT NUMBER

990-089-029-000

FEE NUMBER

ACCOUNT NUMBER

TAX BILL NUMBER

PROPERTY ADDRESS OR LOCATION

10902 Northslope Dr, Kelseyville, CA

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

10,000.00

4,000.00

IMPROVEMENTS/STRUCTURES

FIXTURES

PERSONAL PROPERTY (see instructions)

MINERAL RIGHTS

TREES & VINES

OTHER

TOTAL

10,000.00

4,000.00

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: 7/4/2019ROLL YEAR: 2018-2019☐ 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)**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



Lakeport, CA

7/9/2019

NAME (Please Print)

Chris Weston

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



County of Lake

Richard A. Ford, Assessor-Recorder

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

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

NOTICE OF SUPPLEMENTAL ASSESSMENT

DATE OF NOTICE: 07/04/2019

Parcel Number: 043-472-120-000

Doc Num: 2018R0013015

Asmt Num: 990-089-029-000

Orig Asmt: 043-472-120-000

Situs Address: 10902 NORTHSLOPE DR KELSEYVILLE CA

Comments:

WESTOR SR CHRISTOPHER MARTIN TRUSTEE
PO BOX 185
PHILLIPSVILLE CA 95559

Date of Change of Ownership or Completion of New Construction: 10/10/2018

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	12,474	10,000	-2,474	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	12,474	10,000	-2,474	0	0	0
Exemptions						
Homeowners	0	0	0	0	0	0
Other	0	0	0	0	0	0
NET TOTAL	12,474	10,000	-2,474	0	0	0

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

Chris Eeston 7/9/2019

Comments	Comparable Sales	APN	Paid
	10161 El Capitan Way	043-701-380	\$1,750.00
Similar	10131 El Capitan Way	043-701-400	\$1,750.00
Similar	4696 Iroquois Trail	043-672010	\$1,750.00
Similar	4839 Iroquois Trail	043-674080	\$2,000.00
Similar	4917 Iroquois Trail	043-681-050	\$2,000.00
Similar	4883 Iroquois Trail	043-681-030	\$1,700.00
Similar	4618 Iroquois Trail	043-661-410	\$500.00
Similar	5355 Monterey Place	043-614-150	\$2,000.00
Filter Lake View	10709 Hawaina Place	043-383-070	\$2,000.00
Similar	10100 El Dorado Way	043-722-160	\$
Similar	10691 Sunset Ridge Dr.	043-522-130	\$2,000.00
Similar	10700 Sunset Ridge Dr.	043-521-070	\$1,700.00 est.
Big Lake View	5717 Ponca Way	430-103-040	\$4,000.00
Big Lake View	10902 Northslope Dr.	043-472-120	\$4,000.00
Big Lot, 29 Ac	17237 Cache Creek Rd	062-441010	\$3,000.00
Filter Lake View	9526 Fairway Dr.	430-132-030	\$2,500.00
Small Lake View	10898 Northslope Dr.	043-472-110	\$3,000.00
Nice Lake View	4587 Hawaina Way	043-403-100	\$4,000.00
Similar	10479 Boren Bega Dr.	043-434-100	\$2,000.00
Realtor	10493 Boren Bega Dr.	043-434-110	\$3,000.00
Realtor Seller	2933 Lakeview Dr, Nice	031-113-690	\$2,600.00
R Home Seller	2923 Lakeview Dr, Nice	031-113-680	\$2,600.00

Note: Date of Notice of Supplemental Assessment is suspicious.
 July 4 is a national holiday everywhere in the USA! Not a work day!

County of Lake
Lakeport, California

Receipt No. 1363847

Department: 1012

Date 7-9-19

Received of Christopher Meador \$175.00

One hundred seventy five and no/100 Dollars

Detail of Deposit 5 x 35⁰⁰ = Assessment Appeals APRN#

043-681-050, 043-674-080, 043-672-010,

043-472-120, 043-701-380

CASH ☐

CHECK ☒

OTHER ☐

By

W. J. J. J. J.

CHRIS WESTON

PH: (707)-223-2226
P.O. BOX 185
PHILIPPSVILLE, CA 95559

96-505/1232

2312

PAY TO THE
ORDER OF

County of Lake \$175.00

UMPQUA BANK

1-866-4UMPQUA
(1-866-486-2782)
WWW.UMPQUABANK.COM

FOR

Assessment Appeals *W. J. J. J. J.*

⑆123205054⑆ 990346264⑆2312