

HEARING DATE CONFIRMATION NOTICE THIS PORTION MUST BE RETURNED

Application No(s): 23-2019 Hearing Date: May 18, 2021 Assessee/Owner: Donald Weese & Suzan Weese APN(s): 142-072-040

YOU MUST COMPLETE AND RETURN THIS PORTION AT LEAST 21 DAYS PRIOR TO THE HEARING DATE

- Yes, I (or my agent) will be present for my scheduled hearing.
- I am unable to attend on the date specified. The request must be submitted at least 21 days prior to the

Clerk will contact you to resche	dule your hearing.	orm below. Upon receipt of the form below, the
 Please withdraw my appeal(s). I 	do not intend to appear	at my scheduled hearing.
Signature: Owner/Agent	Date	Daytime Phone Number
WITHOUT NOTICE		NTION TO APPEAR. FAILURE TO APPEAR UR APPEAL BEING DENIED. OLE PAGE)
	LAKE COUNT CAL BOARD OF EQU ENSION FOR TIME (ALIZATION
Application No(s): 23-2019 Assessee/Owner: Donald Weese & Suzan Weese		Hearing Date: May 18, 2021 APN(s): 142-072-040
1604c, the time for the hearing and indefinitely; provided, however, that up period in which the Local Board of Equa	determination of the all on written notice of my dization is required to co not commence to run un	ordance with Revenue and Taxation Code Section bove-referenced application(s) shall be extended intent to terminate such extension, the two-year onduct a hearing and make a final determination on til 120 days after delivery of such written notice on
Date signed	Pri	int Name of Applicant or Agent
Company/Firm Name (Agent's)	Sig	gnature of Applicant/Agent
Mailing Address	Ci	ty, State, ZIP
Daytime Phone Number		ternate Telephone Number

Please return this form to: LAKE COUNTY

> **CLERK OF THE BOARD** 255 NORTH FORBES STREET LAKEPORT, CA 95453