EF-305-A-R02-0809-23000676-1 BOE-305-A (P1) REV. 02 (08-09)

## **INFORMAL ASSESSMENT REVIEW**

501 Low Gap Road, Room 1020 Ukiah, CA 95482

SUSAN M. RANOCHAK

**MENDOCINO COUNTY ASSESSOR** 

Telephone: (707) 463-4315 Fax: (707) 463-6597

NOTE: To be completed and filed with the assessor's office by March 15.

## **IMPORTANT**

Assessment by [September 15/November 30] if your assessment issue has not been resolved.									
	A	PPLICANT AND F	PROPER	TY IN	IFORMA	TION			
NAME (LAST, FIRST, MIDDLE INITIAL)					ASSESSOR'S PARCEL NUMBER				
MAILING ADDRESS					E-MAIL ADDRESS				
CITY STATE ZIP CODE			DAYTIN	YTIME TELEPHONE ALTERNAT			E TELEPHONE FAX TELEPHONE		
YOUR OPINION OF VALUE AS OF JANUARY 1				URREN					
YOUR PURCHASE PRICE				DATE OF PURCHASE (MONTH, DAY, YEAR)					
	Co	OMPARABLE MAI	RKET DA	ATA II	NFORMA	ATION			
SALE	ADDRESS		SALE DAT	TE PRICE		DESCRIPTION (if additional space is needed, use back of form) <sup>1</sup>			
1									
2									
3									
	<u> </u>	CED	TIFICATI						
I certify	(or declare) that the foregoing and			g any			ments or doc	uments, is true, correct	
					DWNER NAME				
AGENT SIGNATURE (IF APPLICABLE)				AGENT NAME (IF APPLICABLE)					
AGENT COMPANY NAME (IF APPLICABLE)					AGENT E-MAIL ADDRESS (IF APPLICABLE)				

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



EF-305-A-R02-0809-23000676

## **INSTRUCTIONS**

Than [September 15/November 30] if: (1) you are unable to meet the March 15 filing deadline for this form; (2) you receive the assessor's response to your request for an assessment review before September 1 but disagree with the assessor's value; or (3) you do not receive the assessor's response to your request for an assessment review by September 1. If the board of supervisors in the county in which the real property is located has adopted a resolution in accordance with section 1603 of the Revenue and Taxation Code and if you receive the assessor's value conclusion resulting from your request for an assessment review after September 1, then the deadline for filing the Application for Changed Assessment will be either 60 days after the mailing of the response by the assessor or by December 31 of the year in which the application for Informal Assessment Review is filed, whichever is earlier. You should check with the clerk of the board of supervisors to determine if a section 1603 resolution has been adopted. The normal assessment appeals filing period is from JULY 2 through [SEPTEMBER 15/NOVEMBER 30]. You may request an Application for Changed Assessment after July 2 by calling the clerk of the board of supervisors at

