EF-305-A-R02-0809-57000619-1 BOE-305-A (P1) REV. 02 (08-09)

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



YOLO COUNTY COUNTY ASSESSOR

625 Court St, Rm. 104 Woodland, CA 95695 Woodland/Davis (530) 666-8135 Fax (530) 666-8213 West Sacramento (916) 375-6496 assessor@yolocounty.org

IMPORTANT

	APF	LICANT AND F	PROPERTY	INFORM	ATION			
NAME (LAST, FIRST, MIDDLE INITIAL) MAILING ADDRESS				ASSESSO	ASSESSOR'S PARCEL NUMBER E-MAIL ADDRESS			
				E-MAIL AD				
TY STATE ZIP CODE			DAYTIME	IE TELEPHONE ALTERNA		TE TELEPHONE	FAX TELEPHONE	
OUR OPINION OF VALUE AS OF JANUARY 1			CUR	CURRENT TAX BILL ASSESSMENT				
OUR PURCHASE PRICE			DAT	OF PURCHASE	(MONTH, DA	Y, YEAR)		
	COM	IPARABLE MA	RKET DAT	A INFORM	IATION			
SALE	ADDRESS		SALE DATE	ALE DATE PRICE		DESCRIPTION (if additional space is needed, use back of form		
1								
2								
3								
			<u></u> _					
			TIFICATIO					
I certify (or declare	e) that the foregoing and all and	I information hered I complete to the b	on, including a est of my kno	any accompa wledge and	anying state belief.	ements or doc	uments, is true, correct	
WNER SIGNATURE O				DWNER NAME				
GENT SIGNATURE (IF APPLICABLE)				AGENT NAME (IF APPLICABLE)				
GENT COMPANY NAME (IF APPLICABLE)				AGENT E-MAIL ADDRESS (IF APPLICABLE)				

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



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

