

APPLICATION FOR CHANGED ASSESSMENT

This form contains all 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 the appeals board considers necessary may result in the continuance of the hearing.

\$45.00 PROCESSING FEE To be paid at the time of filing for each parcel being appealed. A separate application must be filed for each parcel.

NON-REFUNDABLE

RETURN TO:

San Benito County
Clerk of the Board
481 Fourth Street
Hollister, CA 95023

Application Number:

A-401

For Clerk's Use Only:

PLEASE TYPE OR PRINT IN INK - SEE INSTRUCTIONS FOR FURTHER INFORMATION

1. APPLICANT'S NAME (last, first, middle initial)

Martha A. Fenton / Michael Fenton

STREET ADDRESS/P.O. BOX NUMBER (MUST be applicant's mailing address)

911 ROCKS Rd.

CITY

San Juan Bautista

STATE

CA

ZIP CODE

95045

DAYTIME PHONE

(831) 682-0943

ALTERNATE PHONE

(831) 682-0943

FAX NUMBER

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E-MAIL ADDRESS

tra513@Yahoo.com

2. AGENT OR ATTORNEY FOR APPLICANT

Lucia Rubio

631 Via Varadero Sur

STREET ADDRESS / P.O. BOX NUMBER

San Juan Bautista

CITY

San Juan Bautista

STATE

CA

ZIP CODE

95045

DAYTIME PHONE

(831) 682-0943

ALTERNATE PHONE

(831) 210-2364

FAX NUMBER

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E-MAIL ADDRESS

tra513@Yahoo.com

AGENT'S AUTHORIZATION

If the applicant is a corporation, the agent's authorization must be signed by an officer or authorized employee of the business entity. If the agent is not an attorney licensed in California or a spouse, child, or parent of the person affected, the following must be completed (or attached to this application - see instructions)

PRINT NAME OF AGENT & AGENCY

Is hereby authorized to act as my agent in this application and may inspect assessor's records, enter into stipulations, and otherwise settle issues relating to this application.

SIGNATURE OF APPLICANT/OFFICER/AUTHORIZED EMPLOYEE

DATE

TITLE

DATE

3. PROPERTY IDENTIFICATION INFORMATION

SECURED: ASSESSOR'S PARCEL NUMBER

012-140-014

UNSECURED: ACCOUNT/TAX BILL NUMBER

PROPERTY ADDRESS OR LOCATION:

911 ROCKS Rd San Juan Bautista

DBA:

PROPERTY TYPE:

☒ Single-Family Residence/Condo/Townhouse

☐ Apartments (Number of Units _____)

☐ Commercial/Industrial

☐ Agricultural

☐ Business Personal Property/Fixtures

☐ Is this property an owner-occupied single-family dwelling?

☒ Yes ☐ No

4. VALUE

	A. VALUE ON ROLL	B. APPLICANT'S OPINION OF VALUE
LAND	460,000	
IMPROVEMENTS / STRUCTURES		370,000
PERSONAL PROPERTY	N/A	
TOTAL		
PENALTIES		

5. TYPE OF ASSESSMENT BEING APPEALED (check one)

IMPORTANT - SEE INSTRUCTIONS FOR FILING PERIODS

☐ Regular Assessment - Value as of January 1 of the current year

☐ Supplemental Assessment

ROLL YEAR

Attach 2 Copies of Notice or Tax Bill

Date of Notice or Tax Bill

☐ Roll Change/Escrow Assessment/Calamity Reassessment

ROLL YEAR

Attach 2 Copies of Notice or Tax Bill

Date of Notice or Tax Bill

6. THE FACTS THAT I RELY UPON TO SUPPORT REQUESTED CHANGES IN VALUE ARE AS FOLLOWS: You may check all that apply. If you are uncertain of which item to check, please check "I. Other" and attach two copies of a brief explanation of your reason(s) for filing this application. PLEASE SEE INSTRUCTIONS BEFORE COMPLETING THIS SECTION.

☒ 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 or other reassessable event 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 or other reassessable event occurred on the date of _____

☐ 2. Base year value for the new construction established on the date of _____ is incorrect.

☐ D. Calamity Reassessment: Assessor's reduced value is incorrect for property damaged by misfortune or calamity.

☐ E. Personal Property/Fixtures: Assessor's value of personal property and/or fixtures exceed 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: Assessor's classification and/or allocation of value of property is incorrect.

☐ H. Appeal after an Audit: MUST include description of each property, issues being appealed, and your opinion of value. Please refer to instructions.

☐ 1. Amount of escape assessment is incorrect.

☒ 2. Assessment of other property of the assessee at the location is incorrect.

☐ I. Other: Explain below or attach explanation.

We paid 370,000 to property condition

7. WRITTEN FINDINGS OF FACTS ☐ Are Requested ☐ Are not Requested

DEPOSIT OF \$500.00 PER PARCEL (APN) IS REQUIRED AT THE TIME OF HEARING.

Adjusted for actual time and materials incurred by County Counsel's & Assessor's Office.

8. ☐ YES ☐ NO Do you want to designate this application as a claim for refund? Please refer to instructions first. (CHECK ONE BOX ONLY)

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 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 the 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 No. _____, who has been retained by the applicant and has been authorized by that person to file this application.

SIGNATURE

Martha A. Fenton

SIGNED

CITY

STATE

DATE

95023 11/29/17

NAME AND TITLE (please type or print)

☒ Owner

☐ Agent

☐ Attorney

☐ Spouse

☐ Registered Domestic Partner

☐ Child

☐ Parent

☐ Person Affected