

## OFFICE OF ASSESSOR COUNTY OF ALAMEDA

1221 Oak St., County Administration Building Oakland, California 94612-4288 (510) 272-3787 / FAX (510) 272-3803

## RON THOMSEN ASSESSOR

## 2008-09 INFORMAL REQUEST FOR "DECLINE IN MARKET VALUE" (PROP 8) REASSESSMENT

California State Revenue and Taxation Code, Section 51 authorizes the Assessor to *temporarily* lower the assessed value of any real property when it is greater than the market value as of the January 1, lien date. If you have evidence that the market value of your property as of **January 1, 2008** is less than the assessed value, please provide the information below and return this request to the Assessor's Office by **June 2, 2008**. Requests received after June 2, 2008 may not allow enough time for staff to adequately review the informal request and still complete other mandated functions in a timely manner. If you have any questions please contact our office at (510) 272-3787.

## **Assessment Appeals**

The Assessment Appeals Board (AAB) is an independent body established to resolve differences of opinion between the Assessor and property owners as to property value. To have your issue heard before the board you must file a timely Application for Changed Assessment. These forms are available through and must be filed with the Clerk, Board of Supervisors Office. The forms may be downloaded from their web site at http://www.acgov.org/clerk/assessment.htm and their office may be contacted at (510) 272-6352.

The annual filing period for the 2008 Assessment Appeals Process is between July 2 and September 15, 2008.

If you have not received a response to this informal request from our office by the assessment appeals deadline or do not agree with the response you must file a timely Application for Changed Assessment in order to protect your appeal rights.

Please complete all the information below

1. Owi	ner Information		•			
Assessor's Parcel Number (APN)				Square Feet		
				Daytime Phone ()		
Proper	ty Address					
		Street		City	Zip	
Mailin	g Address					
				City urchase Pric	Zip	
Your opinion of market value as of Janu			y 1, 2008 \$ 2008 A		2008 Assessed Value	
2. Con	nparable Market Da	ta Information				
Sale	Address or APN	Sale Date (Must be prior to 3-31-08)	Sales Price	Square Feet	Description (Single or Multi family: building size, year built, # bedrooms & baths, # of units if multi- family, proximity. Commercial/Industrial: income, building and land size, zoning, proximity)	
a.			\$			
b.			\$			
c.			\$			
3. Age Age	nt Information. If you	ou have hired an	agent to represer	nt you or are	an agent please complete below.  Phone ()	
Age	nt mailing address_					
Street AGENT SIGNATURE				City	Zip Date	
4. <b>OW</b>	NER SIGNATUR	E (required on all	requests)		Date	