

# Office of Assessor

County of Lassen



Date Mailed:  
Date Coded:  
Date to Appraiser:

NICK CEAGLIO, Assessor  
107 S Roop St  
Susanville, CA 9613  
(530) 251-8241  
FAX (530) 251-8245  
assessorsoffice@co.lassen.ca.us

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

## REQUEST FOR DECLINE IN VALUE REAPPRAISAL

As per R & T Code Section 51 (2) and the provisions contained therein, I the undersigned owner of real property in Lassen County, or my authorized agent for same, do hereby request the Lassen County Assessor to review the real property herein listed for the \_\_\_\_\_ assessment year:

### ASSESSOR'S PARCEL NUMBER(S) TO BE REVIEWED:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Owner opinion of market value as of January 1, 201\_\_\_\_ (Should coincide with the assessment year above):

**Land** : \_\_\_\_\_

**Improvements** : \_\_\_\_\_

**Fixtures and/or Personal Property:** \_\_\_\_\_

**Additional Information:**

### Please note:

This request is for an informal review of your assessed value. Your right to officially file an Application for Changed Assessment for the 2019-20 current tax bill ends November 30, 2019 (value as of the January 1, 2019 lien date).

Signature: \_\_\_\_\_

Owner/Agent

Date: \_\_\_\_\_

Telephone: \_\_\_\_\_