EF-305-A-R02-0809-36000271-1 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.



Josie Gonzales Assessor-Recorder-County Clerk

County of San Bernardino Assessor's Office 222 W. Hospitality Lane - 4th Floor San Bernardino, CA 92415-0311 www.sbcounty.gov/arc

Phone: (909) 387-8307 Toll Free: (877) 885-7654

IMPORTANT

	APPLICANT AND I	PROPERTY IN	NFORMATION		<u> </u>
AME (LAST, FIRST, MIDDLE INITIAL)			ASSESSOR'S PARCE	L NUMBER	
AILING ADDRESS			E-MAIL ADDRESS) /	
TY	STATE ZIP CODE	DAYTIME TELE	EPHONE ALTER	RNATE TELEPHONE	FAX TELEPHONE
UR OPINION OF VALUE AS OF JANUA	RY1	CURREN	NT TAX BILL ASSESSME	NT	
OUR PURCHASE PRICE	COMPARABLE MA		NFORMATION		
SALE	ADDRESS	SALE DATE	PRICE	(if additional sp	DESCRIPTION ace is needed, use back of form
1					
2		S			
3					
		RTIFICATION			
I certify (or declare) that the	e foregoing and all information hered and complete to the b	on, including any est of my knowle	accompanying stedge and belief.	atements or docu	uments, is true, correct
VNER SIGNATURE	OWNE	OWNER 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

To protect your rights, you should file an Application for Changed Assessment with the clerk of the county board **NO LATER 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

