

DIANE BROWN BUTTE COUNTY ASSESSOR 25 COUNTY CENTER DRIVE, SUITE 100 OROVILLE CA 95965-3382 Telephone (530) 552-3800 Fax (530) 538-7991 Email: assessorsoffice@buttecounty.net

APPLICATION FOR APPRAISAL REVIEW (Commercial)

Section 51 of the California Revenue and Taxation Code authorizes the Assessor to **temporarily** lower the assessed value of any real property where the assessed value is greater than the market value as of the January 1 lien date. If you believe that the assessed value of your property is higher than the current market value on January 1, please complete and return this application to the Assessor's Office.

This is an application for an informal review of value by the Assessor. Should this review reflect that the property is currently assessed at or below current market value, no change in assessment will be made. If, upon completion of this review you disagree with the Assessor's opinion of value, you may request a hearing before the County Assessment Appeals Board. To do so, you must obtain and file an *Application For Changed Assessment* with the Clerk of the Assessment Appeals Board between July 2 and November 30.

Assessor's Parcel Number	Situs:					
Owner Name Mailing Address						
Property Owner's Opinion of Value _\$	Current As	sessed Value: _\$				
Property Type: 🗌 Apartment	Retail Office Industria	I Other				
Is property income producing?	Yes No If yes, please o	complete page 2				

COMPARABLE MARKET DATA INFORMATION

SALE	PROPERTY ADDRESS	SALE DATE	SALE PRICE	DESCRIPTION Use back of form if additional space is needed
1			\$	
2			\$	
3			\$	

Please provide any additional information that supports your opinion of value. This may include a recent appraisal, written value estimates from realtors, repair permits, or information regarding the condition of the property. Use the back of this form for additional space if needed.

Owner Signature	Date	Daytime Phone Number					
Agent Signature	Date	Daytime Phone Number					

NOTE: The filing of an application for appraisal review does not alter or delay the date property taxes are due. Property taxes are still due by the delinquent date printed on the property tax bill.

Please attach additional pages if necessary, or attach a copy of your current rent roll.

1. Is this property totally owner-occupied? 🗌 Yes 🗌 No If yes, only complete #7 through #9

2. Is this property partially owner-occupied? $\hfill \hfill Yes$ $\hfill \hfill No$

Square feet owner occupied:

Or, percentage owner-occupied:

3. Please provide income and expense information.			Expenses Paid By Tenant (Please check)										
			Month & Year					Ì		/			
						L.	Jance		v lance	ŗ	eg		
Unit No.	Name of Tenant	Unit Size (Sq. Ft.)	Monthly Rent	Lease Begin	Lease End	Exterior	Maintenance	Interior	Pronarty	Tax	Insurance	Utilities	Other
						•							
ANN	JAL EXPENSES												
Mana	igement <u>s</u>	\$		I	nsurance				5				
Exterior Maintenance \$			Utilities \$					5					
Interior Maintenance\$			Janitor <u>\$</u>										
Othe		\$		I	Real Estate T	axe	S		6				
4. What is the annual overage rent?				or				%)				
ls	this amount included ab	oove? 🗌 YE	s 🗌 no										
5. Av	verage vacancy	\$		or				%)				
6. Ar	nual Collection Losses	\$		or				%)				
7. Please indicate the value of Personal Property (if any) included in your acquisition.					\$;							
8. What was your anticipated annual gross income at the acquisition date?					\$	5							
9. W	ere there any structural	alterations made sind	ce your acquis	sition?	YES 🗌 NO)							
	Amount pa	id by Owner: _\$			Amount Paid	d by	Те	nant	: _\$	5			
10. What is your standard allowance for tenant improvements per square foot?													
Is this amount included above? YES NO If yes, please describe below													