ASSESSMENT APPEAL WITHDRAWAL

To Withdraw (Cancel) your Assessment Appeal, complete and sign this form. Return to the Clerk of the Board by E-Mail, Fax, or Mail, to the address shown on the right. DO NOT RETURN THIS FORM TO THE ASSESSOR'S OFFICE.



Clerk of the Assessment Appeals Board

800 South Victoria Avenue, L#1920 Ventura, CA 93009-1920 Phone: (805) 654-2251 Fax: (805) 677-8711

E-Mail: aabclerk@ventura.org Website: www.ventura.org/cob/aab

APPLICANT AN	D PROPERTY INFORM	ATION			
NAME OF APPLICANT:				HEARING DATE if known	
I no longer wish to pursue an assessment appeal on that the Assessment Appeal Application be withdrawn		s, indicated b	elow and h	ereby request	
APPLICATION NUMBER:	ASSESSOR'S PARC	ASSESSOR'S PARCEL NUMBER:			
APPLICATION NUMBER:	ASSESSOR'S PARC	PARCEL NUMBER:			
APPLICATION NUMBER:	ASSESSOR'S PARC	ASSESSOR'S PARCEL NUMBER:			
APPLICATION NUMBER:	ASSESSOR'S PARC	ASSESSOR'S PARCEL NUMBER:			
APPLICATION NUMBER:	ASSESSOR'S PARC	ASSESSOR'S PARCEL NUMBER:			
An Assessment Appeal Application may be withdrawn this request, unless the Assessor has given the application the assessed value of the property. Additionally, the even though the Assessor and Applicant may have act Withdrawals are final and will conclude any further act	n at any time prior to or a licant a written notice of Assessment Appeals E greed to withdraw the ap	t the time of the an intention de an de peal.	the hearing to recomrecide to rev	upon submission of nend an increase in ⁄iew an assessment	
·	ERTIFICATION			·	
I certify that I am authorized to transact all busi the Assess	iness relating to the abo ment Appeal Applicatio		cluding thi	s withdrawal of	
SIGNATURE		DATE			
PRINT NAME OF AUTHORIZED SIGNER		TITLE			
COMPANY NAME		EMAIL ADDRESS			
FILING STATUS				_	
	STERED DOMESTIC PARTNER	CHILD	PARENT	PERSON AFFECTED	
CALIFORNIA ATTORNEY, STATE BAR NUMBER:	COUNTY LICE ONLY	CORPORATI	E OFFICER OR	DESIGNATED EMPLOYEE	
	COUNTY USE ONLY				
The withdrawal request is accepted and will conclude an	ny further action on the app	eal.			
The withdrawal request is denied. The Assessor has de will be notified of the date no less than 45 days prior to		Your appeal v	will be set for	r hearing, in which you	
The withdrawal request is denied by the appeals board proceed with an assessment review to determine the fu ATTEST BY COUNTY BOARD:			appeals boa	rd has the authority to	
DATED:					
BY:Chair, Assessment Appeals Board			Clerk of the	ne Board	