

CLAUDE PARRISH ORANGE COUNTY ASSESSOR 500 S Main Street, First Floor, Suite 103 Orange, CA 92868-4512

P.O. BOX 22000 SANTA ANA, CA 92702-2000 PHONE: (714) 834-2727 FAX: (714) 834-3934 www.ocassessor.gov

COMMERCIAL/INDUSTRIAL PROPERTY

CHECK THE BOX THAT BEST DESCRIBES THIS PROPERTY

Industrial 🗆 Office

 \Box Retail \Box Other

REQUEST FOR INFORMAL ASSESSMENT REVIEW (NO CHARGE TO FILE THIS REQUEST OR TO HAVE YOUR PROPERTY'S VALUE REVIEWED BY THE ASSESSOR)

IMPORTANT: THIS FORM MUST BE FILED BY APRIL 30, 2023

The information you provide will be considered in our review and valuation of your property. If the market value of the property on January 1, 2023, was lower than your Proposition 13 assessed value, you may receive a temporary reduction in taxable value for the upcoming year.

MAIL TO: Orange County Assessor, Attention: Real Property, P.O. Box 22000, Santa Ana, CA 92702-2000. For assistance, please call (714) 834-2727.

CONTACT INFORMATION

PROPERTY INFORMATION

Owner's Name:	Parcel Number(s):		
	Primary Property Address:		
Daytime Phone Number:	City:		
Do you have a Property Tax Agent representing you? Yes \Box No \Box	Total Net Leasable Sq. Ft.:		
If yes, Agent's Name:	Total Sq. Ft. Leased as of Jan. 1, 2023:		
Agent's Daytime Phone Number: Ext:	Opinion of Market Value as of Jan. 1, 2023: \$		

The following documentation is required for the above referenced property:

- 1. Rent Roll to include unit number, square feet, leased rate, lease start date, terms, concessions.
- 2. Income and Expense Statement, most recent 12 months.

COMPARABLE SALES INFORMATION

APN	Address	Sale Price	Sale Date	% Vacant	# Parking Spaces	Description & Value of Any Rent Concessions
		\$				
		\$				
		\$				

IMPORTANT: You may be notified of the results of this review on your Property Value Notice in July 2023 or your property tax bill. If you disagree with the valuation of your property, you may file an assessment appeal with the Clerk of the Board. The filing period is July 2, 2023 to November 30, 2023.

AUTHORIZED I hereby authorize the Property Tax Agent listed above to act as my agent to file this application (if applicable). **AGENT**

SIGNATURE:

Signature of Property Owner

Date

All correspondence related to this review will be mailed to the address we have on file.

ASSESSOR USE ONLY

□ ECA Warranted \$	Remarks:					
Hold						
□ No ECA	Appraiser:	Date:				
A002-259B (R12/22)	PLEASE KEEP A	PLEASE KEEP A COPY OF THIS FORM FOR YOUR RECORDS				