

ASSESSMENT APPEALS BOARD MENDOCINO COUNTY

Board Meeting -- October 30, 2023 -- 1:30pm

COUNTY ADMINISTRATION CENTER BOARD CHAMBERS, ROOM 1070 501 Low Gap Road Ukiah, CA 95482 (707) 463 4441

AGENDA

Zoom Webinar ID: 863 9216 6065

1. OPEN SESSION - CALL TO ORDER

- 1a) Roll Call
- 1b) Confirm Agenda Amendments
- 1c) Announce Order of Proceedings

2. APPROVAL OF WITHDRAWN APPLICATIONS

Case #	Applicant/Agent/Prop Type	APN/Situs
22-0004 11/30/2022 Withdraw Received	MSCI 2007-1Q16 CA KMART PROPERTIES LLC Marvin F. Poer and Company Commercial/Industrial	0023702600 350 Orchard Ave Ukiah
	Decline in Value: The Assessor's roll value exceeds the ma	arket value as of the lien date.
	Current Status: Ready for Hearing	
22-0008 12/19/2022 Withdraw Received	Safeway Inc Altus Group U.S., Inc Commercial/Industrial	0023026100 623 S STATE ST Ukiah
	Decline in Value: The Assessor's roll value exceeds the ma	arket value as of the lien date.

Personal Property/Fixtures: Assessor's value of personal property and/or fixtures has been

incorrectly calculated.

2. APPROVAL OF WITHDRAWN APPLICATIONS (Cont'd)

Case #	Applicant/Agent/Prop Type	APN/Situs
22-0009 12/19/2022 Withdraw Received	Safeway Inc Altus Group U.S., Inc Commercial/Industrial	0180303900 660 S Main St Fort Bragg
	Decline in Value: The Assessor's roll value exceeds the ma Personal Property/Fixtures: Assessor's value of personal p incorrectly calculated.	
	Current Status: Noticed for Hearing	
22-0010 12/19/2022 Withdraw Received	The Vons Companies Inc Altus Group U.S., Inc Commercial/Industrial	0061603300 845 S Main St Willits
	Decline in Value: The Assessor's roll value exceeds the ma Personal Property/Fixtures: Assessor's value of personal p incorrectly calculated.	
	Current Status: Noticed for Hearing	
22-0015 12/6/2022 Withdraw Received	Tyler Dowell KE Andrews Commercial/Industrial	0023014600 610 S State St Ukiah
	Decline in Value: The Assessor's roll value exceeds the ma	arket value as of the lien date.
	Current Status: Noticed for Hearing	

3. APPROVAL OF STIPULATIONS IN PLACE OF APPEARANCE AND TESTIMONY

4. APPROVAL OF REQUESTED CONTINUANCES AND/OR POSTPONEMENTS

Case #	Applicant/Agent/Prop Type	APN/Situs
22-0001 11/30/2022 Postpone Requested	Tesla Energy Operations Inc Versatax Consulting Bus Personal Ppty/Fixtures Only	0410026900003
	Personal Property/Fixtures: Assessor's value of personal properties incorrectly calculated. Other	property and/or fixtures has been
	Current Status: Noticed for Hearing	

5. CONDUCT ASSESSMENT APPEAL PROTEST HEARINGS AND PRESENTATION OF EVIDENCE

6. OTHER BUSINESS

- 6a) Approval of Minutes of July 17, 2023 Meeting
- **6b) Public Expression**
- 6c) Matters from Staff
- 6d) Announcements
- 6e) Confirm Date of Next Meeting December 18, 2023
- 6f) Adjournment

BOE-305-AH (P1) REV. 08 (01-15)

ASSESSMENT APPEAL APPLICATION

This form contains all of the requests for information that are required for filing an application for changed assessment. Failure to complete this application may result in rejection of the application and/or denial of the appeal. Applicants should be prepared to submit additional information if requested by the assessor or at the time of the hearing. Failure to provide information at the hearing the appeals board considers necessary may result in the continuance of the hearing or denial of the appeal. Do not attach hearing evidence to this application.



COUNTY OF MENDOCINO
ASSESSMENT APPEALS BOARD
501 Low Gap Road • Room 1010
Ukiah, California 95482
TELEPHONE: (707) 463-4221
FAX: (707) 463-7237

the hearing. Failure to provide information at the appeals board considers necessary may	result in the				\$75.00 Filing Fee	
continuance of the hearing or denial of the appeal. Do not attach hearing evidence to this application.					APPLICATION NUM	IBER: Clerk Use Only
1. APPLICANT INFORMATION - PLEASE PRINT NAME OF APPLICANT (LAST, FIRST, MIDDLE INITIAL), BUSINESS, OR TRUST NAME MSCI 2007-1Q16 CA KMART PROPERTIES LLC					EMAIL ADDRESS rrosen@Inrpartne	
MAILING ADDRESS OF APPLICANT (STREET ADDRESS OF 2340 COLLINS AVENUE, STE 700						-
MIAMI BEACH	STATE ZIP CO			ME TELEPHONE 05)695-5358	ALTERNATE TELEPHO	NE FAX TELEPHONE
2. CONTACT INFORMATION - AGENT, ATT		LATIVE OF	APPL	ICANT if app		
NAME OF AGENT, ATTORNEY, OR RELATIVE (LAST, FIRST DONALD, SCOTT	, MIDDLE INITIAL)				scottdonald@mfpoe	er.com
COMPANY NAME MARVIN F. POER AND COMPANY						
CONTACT PERSON IF OTHER THAN ABOVE (LAST, FIRST,	MIDDLE INTITAL)					
MAILING ADDRESS (STREET ADDRESS OR P. O. BOX) 2151 MICHELSON DRIVE, SUITE 282						
CITY Irvine	STATE ZIP CO			ME TELEPHONE) 556-9001	alternate telepho (949)757-099	ne
AUTHORIZATION OF AGENT The following information must be complet attorney as indicated in the Certification s applicant is a business entity, the agent's a The person named in Section 2 above is he	ection, or a spou authorization mu	o this applic use, child, p ust be signe	cation - parent, ed by a	registered don n officer or au	ns) unless the agent is mestic partner, or the thorized employee of	person affected. If the the business.
enter in stipulation	agreements, an			issues relatin	g to this application.	,
SIGNATURE OF APPLICANT, OFFICER OF AUTHORIZED B	EMPLOYEE			TITLE Randa		DATE (4,2)
Jum / //	TION			VICE I	President	11-1100
3. PROPERTY IDENTIFICATION INFORMA YES NO Is this property a sing		hatia aasuui		a muimaimal mlaaa	of residence by the sum	.or2
			eu as m	е рипсіраї ріасе	e of residence by the own	ei r
ENTER APPLICABLE NUMBER FROM YO	ASSESSMEN				EEE NIIMBED	
ASSESSOR'S PARCEL NUMBER 002-370-26-00	ASSESSIVIEI	NI NOWBER			FEE NUMBER	
ACCOUNT NUMBER	TAX BILL NU	MBER				
PROPERTY ADDRESS OR LOCATION 350 ORCHARD AVE UKIAH CA					DOING BUSINESS AS (I	DBA), if appropriate
PROPERTY TYPE 🔟						
☐ SINGLE-FAMILY / CONDOMINIUM / TOW	NHOUSE / DUPL	.EX 🗆	AGRI	CULTURAL	□ POSS	SESSORY INTEREST
☐ MULTI-FAMILY/APARTMENTS: NO. OF U	NITS		MAN	JFACTURED H	HOME □ VACA	ANT LAND
☑ COMMERCIAL/INDUSTRIAL			WATE	ER CRAFT	□ AIRC	RAFT
☐ BUSINESS PERSONAL PROPERTY/FIXT	URES		OTHE	ER:		
4. VALUE	A. VALUE	E ON ROLL		B. APPLICANT	'S OPINION OF VALUE	C. APPEALS BOARD USE ONLY
LAND	2,875,059			922,835		
IMPROVEMENTS/STRUCTURES	10,832,984			3,477,165		
FIXTURES						
PERSONAL PROPERTY (see instructions)						
MINERAL RIGHTS						
TREES & VINES						
OTHER						
TOTAL	13,708,043			4,400,000		
PENALTIES (amount or percent)						

18245/ Ukiah Home THIS DOCU

BOE-305-AH (P2 REV. 08 (01-15) 5. TYPE OF ASSESSMENT BEING APPEALED Check only one. See instructions for filing periods ${\color{red} igstar}$ REGULAR ASSESSMENT – VALUE AS OF JANUARY 1 OF THE CURRENT YEAR ☐ SUPPLEMENTAL ASSESSMENT *DATE OF NOTICE: ROLL YEAR: ☐ ROLL CHANGE ☐ ESCAPE ASSESSMENT ☐ CALAMITY REASSESSMENT ☐ PENALTY ASSESSMENT *DATE OF NOTICE: **ROLL YEAR: *Must attach copy of notice or bill, where applicable **Each roll year requires a separate application 6. REASON FOR FILING APPEAL (FACTS) See instructions before completing this section. If you are uncertain of which item to check, please check "I. OTHER" and provide a brief explanation of your reasons for filing this application. The reasons that I rely upon to support requested changes in value are as follows: A. DECLINE IN VALUE ∏ The assessor's roll value exceeds the market value as of January 1 of the current year. B. CHANGE IN OWNERSHIP ☐ 1. No change in ownership occurred on the date of _ 2. Base year value for the change in ownership established on the date of C. NEW CONSTRUCTION 1. No new construction occurred on the date of ____ 2. Base year value for the completed new construction established on the date of ☐ 3. Value of construction in progress on January 1 is incorrect. D. CALAMITY REASSESSMENT Assessor's reduced value is incorrect for property damaged by misfortune or calamity. E. BUSINESS PERSONAL PROPERTY/FIXTURES. Assessor's value of personal property and/or fixtures exceeds market value. 1. All personal property/fixtures. 2. Only a portion of the personal property/fixtures. Attach description of those items. F. PENALTY ASSESSMENT Penalty assessment is not justified. G. CLASSIFICATION/ALLOCATION 1. Classification of property is incorrect. 2. Allocation of value of property is incorrect (e.g., between land and improvements). H. APPEAL AFTER AN AUDIT. Must include description of each property, issues being appealed, and your opinion of value. 1. Amount of escape assessment is incorrect. 2. Assessment of other property of the assessee at the location is incorrect. I. OTHER ☐ Explanation (attach sheet if necessary) 7. WRITTEN FINDINGS OF FACTS (\$ Are requested. Are not requested. 8. THIS APPLICATION IS DESIGNATED AS A CLAIM FOR REFUND See instructions. √ Yes CERTIFICATION I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief and that I am (1) the owner of the property or the person affected (i.e., a person having a direct economic interest in the payment of taxes on that property - "The Applicant"), (2) an agent authorized by the applicant under item 2 of this application, or (3) an attorney licensed to practice law in the State of California, State Bar , who has been retained by the applicant and has been authorized by that person to file this application. Number Original signatur SIGNATURE: (Use Blu equired on paper-filed application) SIGNED AT (CITY, STATE) IRVINE, CA Scott Dobald, Vice President

FILING STATUS (IDENTIFY RELATIONSHIP TO APPLICANT NAMED IN SECTION 1)

OWNER
AGENT
ATTORNEY
SPOUSE
REGISTERED DOMESTIC PARTNER
CHILD
PARENT
PERSON AFFECTED

CORPORATE OFFICER OR DESIGNATED EMPLOYEE



ASSESSMENT APPEALS BOARD MENDOCINO COUNTY

501 Low Gap Road, Room 1010 Ukiah, CA 95482

Telephone: (707) 463-4441 FAX: (707) 463-7237

ASSESSMENT APPEAL APPLICATION WITHDRAWAL

Pursuant to Section 4831 of the Revenue and Taxation Code, a taxpayer may withdraw his/her application From the appeals process. However, the Assessment Appeals Board is not required to accept withdrawal of an application for reduced assessment.

Should you decide to withdraw your application(s), please notify the Executive Office promptly by completing and returning this form to:

MENDOCINO COUNTY EXECUTIVE OFFICE 501 Low Gap Road, Room 1010 Ukiah, CA 95482

Attn: Atlas M.A. Pearson, Senior Deputy Clerk of the Assessment Appeals Board

I hereby withdraw my application(s) for changed assessment.

Applicant:

MSCI 2007-1Q16 CA KMART PROPERTIES LLC

Address:

2340 Collins Avenue, Ste 700

Miami Beach, FL 33139

APN/Account #:

0023702600

Tax Year Protested:

Appeal Roll Type:

Regular

Application/Case #:

22-0004

Date: 9/27/23

Applicant's Signature (Original Required)

OCT 2'23 PH3:32 'EC'D BOARD OF SUPERVI BOE-305-AH (P1) REV. 08 (01-15)

OTHER

PENALTIES (amount or percent)

ASSESSMENT APPEAL APPLICATION

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continuance of the hearing or denial of the appeal. Do not attach hearing evidence to this application. **APPLICATION NUMBER: Clerk Use Only** 22-0008 1. APPLICANT INFORMATION - PLEASE PRINT EMAIL ADDRESS NAME OF APPLICANT (LAST, FIRST, MIDDLE INITIAL), BUSINESS OR TRUST NAME SAFEWAY INC MAILING ADDRESS OF APPLICANT (STREET ADDRESS OR P. O. BOX) 250 E PARKCENTER BLVD CITY ZIP CODE DAYTIME TELEPHONE ALTERNATE TELEPHONE STATE FAX TELEPHONE BOISE 83706 ID 2. CONTACT INFORMATION - AGENT, ATTORNEY, OR RELATIVE OF APPLICANT if applicable - (REPRESENTATION IS OPTIONAL) NAME OF AGENT, ATTORNEY, OR RELATIVE (LAST, FIRST, MIDDLE INITIAL) GANGLOFF, DAVID L. JR. PTAAPPEALS@PROPERTY-TAXES.COM COMPANY NAME ALTUS GROUP U.S., INC. CONTACT PERSON IF OTHER THAN ABOVE (LAST, FIRST, MIDDLE INITIAL) BUSKIRK, DAVID B (BRENT) MAILING ADDRESS (STREET ADDRESS OR P. O. BOX) 16600 WOODRUFF AVE., SUITE 200 STATE ZIP CODE DAYTIME TELEPHONE ALTERNATE TELEPHONE FAX TELEPHONE **BELLFLOWER** (562) 920-5775 90706 (562) 282-5926 CA (562) 282-5905 (Admin) AUTHORIZATION OF AGENT ■ AUTHORIZATION ATTACHED The following information must be completed (or attached to this application - see instructions) unless the agent is a licensed California attorney as indicated in the Certification section, or a spouse, child, parent, registered domestic partner, or the person affected. If the applicant is a business entity, the agent's authorization must be signed by an officer or authorized employee of the business. The person named in Section 2 above is hereby authorized to act as my agent in this application, and may inspect assessor's records, enter in stipulation agreements, and otherwise settle issues relating to this application. SIGNATURE OF APPLICANT, OFFICER, OR AUTHORIZED EMPLOYEE TITLE DATE 3. PROPERTY IDENTIFICATION INFORMATION Yes No Is this property a single-family dwelling that is occupied as the principal place of residence by the owner? ENTER APPLICABLE NUMBER FROM YOUR NOTICE/TAX BILL ASSESSOR'S PARCEL NUMBER ASSESSMENT NUMBER FEE NUMBER 002-302-6100 TAX BILL NUMBER ACCOUNT NUMBER 1297083 PROPERTY ADDRESS OR LOCATION DOING BUSINESS AS (DBA), if appropriate 623 S STATE ST UKIAH SAFEWAY INC #1583 PROPERTY TYPE ✓ SINGLE-FAMILY / CONDOMINIUM / TOWNHOUSE / DUPLEX ☐ AGRICULTURAL POSSESSORY INTEREST ■ MULTI-FAMILY/APARTMENTS: NO. OF UNITS ■ MANUFACTURED HOME □ VACANT LAND □ WATER CRAFT AIRCRAFT □ COMMERCIAL/INDUSTRIAL ☐ BUSINESS PERSONAL PROPERTY/FIXTURES OTHER: B. APPLICANT'S OPINION OF VALUE C. APPEALS BOARD USE ONLY 4. VALUE A. VALUE ON ROLL 1,333,121 666,561 LAND 6,068,514 3,034,257 IMPROVEMENTS/STRUCTURES **FIXTURES** 1,242,443 621,221 PERSONAL PROPERTY (see instructions) MINERAL RIGHTS TREES & VINES

8,644,078

4,322,039

TOTAL

BOE-305-AH (P2) REV. 08 (01-15)
5. TYPE OF ASSESSMENT BEING APPEALED 🗹 Check only one. See instructions for filing periods
☑ REGULAR ASSESSMENT - VALUE AS OF JANUARY 1 OF THE CURRENT YEAR
□ SUPPLEMENTAL ASSESSMENT
*DATE OF NOTICE: **ROLL YEAR:
☐ ROLL CHANGE ☐ ESCAPE ASSESSMENT ☐ CALAMITY REASSESSMENT ☐ PENALTY ASSESSMENT
*DATE OF NOTICE: **ROLL YEAR:
*Must attach copy of notice or bill, where applicable **Each roll year requires a separate application
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2. Base year value for the change in ownership established on the date of is incorrect.
C. NEW CONSTRUCTION
1. No new construction occurred on the date of
2. Base year value for the completed new construction established on the date of is incorrect.
 3. Value of construction in progress on January 1 is incorrect. D. CALAMITY REASSESSMENT Assessor's reduced value is incorrect for property damaged by misfortune or calamity.
E. BUSINESS PERSONAL PROPERTY/FIXTURES. Assessor's value of personal property and/or fixtures exceeds market value.
□ 1. All personal property/fixtures.
2. Only a portion of the personal property/fixtures. Attach description of those items.
F. PENALTY ASSESSMENT Penalty assessment is not justified.
G. CLASSIFICATION/ALLOCATION
☐ 1. Classification of property is incorrect.
2. Allocation of value of property is incorrect (e.g., between land and improvements).
H. APPEAL AFTER AN AUDIT Must include description of each property, issues being appealed, and your opinion of value.
☐ 1. Amount of escape assessment is incorrect.
2. Assessment of other property of the assessee at the location is incorrect.
I. OTHER
Explanation (attach sheet if necessary)
7. WRITTEN FINDINGS OF FACTS (\$ per)
☐ Are requested. ☒ Are not requested.
8. THIS APPLICATION IS DESIGNATED AS A CLAIM FOR REFUND See instructions.
CERTIFICATION
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any
accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief and that I am (1) the owner of the property or the person affected (i.e., a person having a direct economic interest in the payment of taxes on that property - "The Applicant"), (2) an agent authorized by the applicant under item 2 of this application, or (3) an attorney licensed to practice law in the State of California, State Bar Number, who has been retained by the applicant and has been authorized by that person to file this application.
SIGNATURE (Use Blue Pen - Original signature required on paper-filed application) SIGNED AT (CITY, STATE) DATE
BELLFLOWER, CA NUV 2 3 202
NAME (Please Frint)
DAVID L. GANGLOFF, JR. FILING STATUS (IDENTIFY RELATIONSHIP TO APPLICANT NAMED IN SECTION 1)
☐ OWNER ☐ ATTORNEY ☐ SPOUSE ☐ REGISTERED DOMESTIC PARTNER ☐ CHILD ☐ PARENT ☐ PERSON AFFECTED
CORPORATE OFFICER OR DESIGNATED EMPLOYEE

BOE-305-AG (P1) REV. 03 (02-20)

AUTHORIZATION OF AGENT/ DESIGNATION OF ATTORNEY

May be filed with initial Assessment Appeal Application when naming an agent or when an agent or California attorney is being named when none was named in the initial application. Mail or fax the completed form to the Clerk of the Board at the address shown.

MENDOCINO County

		APPLICA	ANT AND PRO	PER	TY INFORMIAT	LIOH		
NAME O	F APPLICANT (LAST, FIRST, MIDDLE INITIAL)				EMAIL ADDR	RESS		
	WAY INC / SAFEWAY STORES	INC / THE	VONS COMPA	NIES	NC			
	ADDRESS OF APPLICANT (STREET ADDRESS				•			
250 E	PARKCENTER BLVD							
CITY		STATE	ZIP CODE	DAYT	IME TELEPHONE	ALTERNA	TE TELEPHONE	FAX TELEPHONE
BOIS	E	ID	83706	1)	1()		()
	D: ASSESSORS PARCEL NUMBER				UNSECURED: ACCOUN			IDOCINIO
ALL P	ROPERTY IN COUNTY OF MEN	NDOCINO			ALL PROPERTY	IN COU	ATY OF MEN	NDOCINO
	UTHORIZATION OF AGENT [RNIA ATTORNE			
	applicant is a corporation, limited pyee of the business entity.	artnership,	or limited liabilit	y com				y an officer or authorize
NAME OF	F AGENT OR ATTORNEY				1	PTAAPP		perty-taxes.com
COMPAN								
	IS GROUP U.S., INC.							and additional to the same of
	ADDRESS (STREET ADDRESS OR P.O.BOX)							
) WOODRUFF AVE., STE 200		ZIP CODE	DAYT	IME TELEPHONE	ALTERNA"	TE TELEPHONE	FAX TELEPHONE
CITY	EL OWED	CA	90706		52) 920-1864	/	i i i i i i i i i i i i i i i i i i i	(562) 920-5775
BELL	FLOWER pove named person/company is her					n and may	, inchect Acce	
> >	NT SIGNATURE CASAN				APPLICANT TITLE Property Tax	Manager		DATE
	Barrett							8/15/2022
Calend years in	The remaining sections are requivalent of the content of the conte	DAR YEAR(mber 31. The calendar y ded to file As d within the statement ized to file As	S): 2022 is authorization rears. See Rule 3 esessment Appea county owned by Assessment App operties identified	must b 305(a) al Appli this a	e completed for the (1)(B). cation and transact applicant. pplication and transaction	e specific et all busin sact all b	year in which ess relating to usiness relatir	the application is filed of such filings on any and and to such filings on the
			CERTIFICAT					
	I am an agent for the applicant filin Appeal Application, attached to this I have been retained as the agent fo	authorization or the applic	on, has been forw ant who has prev	arded ⁄iously	to the applicant ne filed an Assessme	amed in th ent Appea	e application. I Application.	
If a cop	y of this form is being submitted, or for any <u>a</u> ction <u>being re</u> quested will b	the form is e denied.	being submitted	electro	nically, I will produ	uce the or	iginal form wit	h original signatures upoi
1040000	Of any action being requested will be				DOINT ACCENT MALE			
AGENIS	GAMERE TO THE TOTAL OF THE STATE OF THE STAT	~	_		PRINT AGENT NAME	I OEE I	P E//D	
AGENTS	OMPANY NAME	~			PRINT AGENT NAME DAVID GANG EMAIL ADDRESS	LOFF, J	R., EVP	



MENDOCINO COUNTY SECURED TAX STATEMENT FOR FISCAL YEAR JULY 1, 2022 THROUGH JUNE

FOR TAX YEAR 2022 - 2023

www.mendocinocounty.org/ttc

Print Date: 11/18/2022

PROPERTY INFORMATION

PARCEL NUMBER: 0023026100

TAX RATE AREA: 003031

ACRES: 0

LOCATION: 623 S STATE ST UKIAH CA LIEN DATE OWNER: SAFEWAY INC

#1583

SAFEWAY INC

1371 OAKLAND BLVD STE 200 WALNUT CREEK CA 94596



SEE REVERSE FOR IMPORTANT INFORMATION

TELEPHONE NUMBERS

COUNTY VALUES AND EXEMPTIONS

Tax Collection	(707) 234-6875
Address Change	(707) 234-6800
Exemptions	(707) 234-6801
Assessed Values	(707) 234-6800
Tax Rates	(707) 234-6859
Personal Property	(707) 234-6815

VALUE DESCRIPTION	VALUE
Land	\$1,333,121
Structures	\$6,068,514
Business Personal Property	\$1,242,443
Net Value	\$8,644,078

VOTER A	VOTER APPROVED TAXES, TAXING AGENCY DIRECT CHARGES AND SPECIAL ASSESSMENTS						
TELEPHONE NUMBERS	DESCRIPTION	TAX RATE PERCENT	AGENCY TAXES/CHARGES	_			
707-234-6859	County Wide Base Tax	1.000	\$86,440.78				
707-468-3068	Mendocino-Lake CC Bond	0.024	\$2,074.58				
707-472-5013	Ukiah Unified Bond	0.157	\$13,571.20				
707-462-7921	Ukiah Vly Fire Measure B	0.000	\$30.00				
707-462-7921	Ukiah Vly Fire Measure J	0.000	\$150.00				

DUE AND PAYABLE ON	11/01/2022	DUE AND PAYABLE ON	02/01/2023	
1ST INSTALLMENT	51,133.28	2ND INSTALLMENT	51,133.28	TOTAL TAXES
DELINQUENT AFTER	12/12/2022	DELINQUENT AFTER	04/10/2023	102,266.56

RETURN THIS STUB WITH YOUR PAYMENT

PLEASE MAKE CHECK PAYABLE TO: MENDOCINO COUNTY TAX COLLECTOR 501 Low Gap Rd, Room 1060 Ukiah, CA 95482

2ND INSTALLMENT PAYMENT CAN NOT BE ACCEPTED UNLESS THE 1ST INSTALLMENT HAS BEEN PAID.

> ASSESSED TO ▼ SAFEWAY INC 1371 OAKLAND BLVD STE 200 WALNUT CREEK CA 94596

▲ DETACH HERE ▲

2ND INSTALLMENT PAYMENT STUB

MENDOCINO COUNTY SECURED PROPERTY TAXES TAX RATE AREA **BILL NUMBER** PARCEL NUMBER 0023026100 003031 1297083

ND

04/10/2023 51,133.28 IF PAID BY

5,113.33 10% PENALTY 20.00 COST CHARGE

AFTER April 10, 2023 PAY THIS AMOUNT ▶ 56,266.61

0000005005305P700002773359002P5PPP707055PP2P

RETURN THIS STUB WITH YOUR PAYMENT

PLEASE MAKE CHECK PAYABLE TO: MENDOCINO COUNTY TAX COLLECTOR **501** Low Gap Rd, Room 1060 Ukiah, CA 95482

TO PAY TOTAL TAX OF 102,266.56 RETURN **BOTH STUBS WITH PAYMENT BY** December 12, 2022

ASSESSED TO ▼

SAFEWAY INC 1371 OAKLAND BLVD STE 200 WALNUT CREEK CA 94596

▲ DETACH HERE ▲

1ST INSTALLMENT PAYMENT STUB

MENDOCINO COUNTY SECURED PROPERTY TAXES

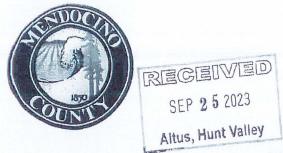
BILL NUMBER PARCEL NUMBER TAX RATE AREA 1297083 0023026100 003031

ST

51,133.28 IF PAID BY 12/12/2022

5.113.33 10% PENALTY

AFTER December 12, 2022 PAY THIS AMOUNT ▶ 56,246.61



ASSESSMENT APPEALS BOARD MENDOCINO COUNTY

501 Low Gap Road, Room 1010 Ukiah, CA 95482 Telephone: (707) 463-4441

FAX: (707) 463-7237

ASSESSMENT APPEAL HEARING DATE CONFIRMATION NOTICE

Hearing Date/Time: 10/30/2023 1:30pm Location: COUNTY ADMINISTRATION CEN	TER
Application Number(s): 22-0008 Parcel Number(s): 0023026100 Applicant: Safeway Inc	
	eck one of the items shown below.
() I will be present on the scheduled hea	aring date.
() I wish to postpone or withdraw my ap	plication, and my signed form is attached.
I realize that if I, or my designated agent, do application may be denied for lack of appear	not appear at the scheduled hearing time and date, my rance.
What Is My Obligation To Provide Written	Notice Of Intent to Appear At Hearing?
	or her intention to appear and present an evidentiary case at a g the Clerk of the Board's Assessment Appeal Hearing Date 30 days prior to the hearing date).
	form, then the Assessor will not be required to be prepared to he applicant appear on the date of the hearing.
Applicant's Name (please print)	Brent Buskirk Altus Group U.S., Inc. Agent's Name (please print)
Applicant's Signature	Agent's Signature

Please Return This Notice in the Envelope Provided to the Clerk of the Board By October 5, 2023



COUNTY OF MENDOCINOAssessment Appeals Board

DARCIE ANT CHIEF EXECUTIVE OFFICE CLERK OF THE BOAI

501 Low Gap Rd. Room 1010 Ukiah, CA 95482 Email: cobsupport@mendocinocounty.org Website: www.mendocinocounty.org

Office: (707) 463-4441 Fax: (707) 463-5649

APPLICATION WITHDRAWAL

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Mendocino County Executive Office

501 Low Gap Road, Room 1010

Ukiah, CA. 95482

Attn: Atlas Pearson, Senior Deputy Clerk of the Board

	equest a continuance of the following application(s) for changed assessment: npleted by Applicant)
NAME:	SAFEWAY INC
ADDRESS:	623 S State St, Ukiah
APN/Acco	DUNT NO.: 0023026100
TAX YEAR I	PROTESTED: 2022/2023
TYPE OF AS	SSESSMENT: REGULAR SUPPLEMENTAL OTHER:
PROTEST/A	APPLICATION No.: 22-0008
DATE: 10	Applicant's Signature (Original Required)

ASSESSMENT APPEAL APPLICATION

This form contains all of the requests for information that are required for filing an application for changed assessment. Failure to complete this application may result in rejection of the application and/or denial of the appeal. Applicants should be prepared to submit additional information if requested by the assessor or at the time of the hearing. Failure to provide information at the hearing the appeals board considers necessary may result in the continuance of the hearing or denial of the appeal. **Do not attach hearing evidence to this application.**



COUNTY OF MENDOCINO
ASSESSMENT APPEALS BOARD
501 Low Gap Road • Room 1010
Ukiah, California 95482
TELEPHONE: (707) 463-4221
FAX: (707) 463-7237

attach hearing evidence to this application. 1. APPLICANT INFORMATION - PLEASE PRINT				APPLICATION NUMBER: Clerk Use Only			
NAME OF APPLICANT (LAST, FIRST, MIDDLE INITIAL), BUSINESS OR TRUST NAME				EMAIL ADDRESS			
SAFEWAY INC MAILING ADDRESS OF APPLICANT (STREET ADDRESS OR	P. O. BOX)						
250 E PARKCENTER BLVD	07.175	710.0005		TELEBUONE		ELV TELEBUOVE	
BOISE	ID	83706 D	AYIIME	TELEPHONE	ALTERNATE TELEPHONE	FAX TELEPHONE ()	
2. CONTACT INFORMATION - AGENT, ATT NAME OF AGENT, ATTORNEY, OR RELATIVE (LAST, FIRST GANGLOFF, DAVID L. JR.			APPI	ICANT if app	plicable - (REPRESEN E-MAIL ADDRESS PTAAPPEALS@PROPER		
COMPANY NAME ALTUS GROUP U.S., INC.							
CONTACT PERSON IF OTHER THAN ABOVE (LAST, FIRST, IBUSKIRK, DAVID B (BRENT)	MIDDLE INIT	/AL)					
MAILING ADDRESS (STREET ADDRESS OR P. O. BOX) 16600 WOODRUFF AVE., SUITE 200		Tain 0005		75,550,005			
BELLFLOWER	CA) 282-5926	(562) 282-5905 (Adr	. 500 . 000 5775	
AUTHORIZATION OF AGENT	- Landau Carlos		ATIO	N ATTACHEI	D	MINISTER TEXT	
The following information must be comple attorney as indicated in the Certification sapplicant is a business entity, the agent's	section, o	tached to this appl or a spouse, child,	licatio pare	on - see instr nt, registered	ructions) unless the ag d domestic partner, o	r the person affected. If the	
The person named in Section 2 above is he enter in stipulation					application, and may i		
SIGNATURE OF APPLICANT, OFFICER, OR AUTHORIZED E	MPLOYEE		TI.	TLE		DATE	
3. PROPERTY IDENTIFICATION INFORMA	TION						
Yes No Is this property a single-f	amily dwel	ing that is occupied as	the pr	incipal place of	residence by the owner?		
ENTER APPLICABLE NUMBER FROM YOU	R NOTIC	E/TAX BILL					
ASSESSOR'S PARCEL NUMBER 018-030-3900		ESSMENT NUMBER			FEE NUMBER		
ACCOUNT NUMBER	тах 1332	BILL NUMBER 786				ar Caragona in the C	
PROPERTY ADDRESS OR LOCATION 660 S MAIN ST FORT BRAGG					DOING BUSINESS AS (DBA), if appropriate SAFEWAY INC #0978		
PROPERTY TYPE 🗹							
☐ SINGLE-FAMILY / CONDOMINIUM / TOWN	NHOUSE .	DUPLEX	AGRI	CULTURAL	☐ POSS	ESSORY INTEREST	
☐ MULTI-FAMILY/APARTMENTS: NO. OF UI	NITS		MANU	JFACTURED H	HOME VACA	NT LAND	
□ COMMERCIAL/INDUSTRIAL			WATE	R CRAFT	☐ AIRCF	RAFT	
☐ BUSINESS PERSONAL PROPERTY/FIXTU	JRES		ОТНЕ	:R:			
4. VALUE	Α.	VALUE ON ROLL		B. APPLICAN	T'S OPINION OF VALUE	C. APPEALS BOARD USE ONL'	
LAND		2,066,	313		1,033,156		
IMPROVEMENTS/STRUCTURES		4,068,	219		2,034,110		
FIXTURES							
PERSONAL PROPERTY (see instructions)		988,	121		494,061		
MINERAL RIGHTS	4 1				A CONTRACTOR OF THE PARTY OF TH	, assets from the second of the second of	
TREES & VINES							
OTHER							
TOTAL		7,122,	653		3,561,327		
PENALTIES (amount or percent)							

BOE-305-AH (P2) REV. 08 (01-15) 5. TYPE OF ASSESSMENT BEING APPEALED Check only one. See in	and the state of t
☑ REGULAR ASSESSMENT - VALUE AS OF JANUARY 1 OF THE	CURRENT YEAR
☐ SUPPLEMENTAL ASSESSMENT	
*DATE OF NOTICE: **ROLL YEAR:	
☐ ROLL CHANGE ☐ ESCAPE ASSESSMENT ☐ CALAM	
*DATE OF NOTICE: **ROLL YEAR:	
*Must attach copy of notice or bill, where applicable **Each 6. REASON FOR FILING APPEAL (FACTS) See instruction	ions before completing this section.
If you are uncertain of which item to check, please check "I. OTHER" and p The reasons that I rely upon to support requested changes in value are as A. DECLINE IN VALUE	provide a brief explanation of your reasons for filing this application.
$oxed{oxed}$ The assessor's roll value exceeds the market value as of January	y 1 of the current year.
B. CHANGE IN OWNERSHIP 1. No change in ownership occurred on the date of	
2. Base year value for the change in ownership established on the	
	date of is incorrect.
C. NEW CONSTRUCTION 1. No new construction occurred on the date of	
2. Base year value for the completed new construction established	on the date of is incorrect.
☐ 3. Value of construction in progress on January 1 is incorrect.	
D. CALAMITY REASSESSMENT Assessor's reduced value is incorrect for property damaged by m	nisfortune or calamity
E. BUSINESS PERSONAL PROPERTY/FIXTURES. Assessor's value of	
	r personal property and/or fixtures exceeds market value.
2. Only a portion of the personal property/fixtures. Attach descrip	otion of those items.
F. PENALTY ASSESSMENT Penalty assessment is not justified.	
G. CLASSIFICATION/ALLOCATION	
1. Classification of property is incorrect.	
2. Allocation of value of property is incorrect (e.g., between land a	and improvements).
H. APPEAL AFTER AN AUDIT Must include description of each proper 1. Amount of escape assessment is incorrect.	
2. Assessment of other property of the assessee at the location is	s incorrect.
I. OTHER	
Explanation (attach sheet if necessary)	
7. WRITTEN FINDINGS OF FACTS (\$ per)	
☐ Are requested. ☒ Are not requested.	
8. THIS APPLICATION IS DESIGNATED AS A CLAIM FOR REFUND See	e instructions.
Yes □ No	
CERTIFICATI	
I certify (or declare) under penalty of perjury under the laws of the State of Ca accompanying statements or documents, is true, correct, and complete to the property or the person affected (i.e., a person having a direct economic interes agent authorized by the applicant under item 2 of this application, or (3) an a Number, who has been retained by the applicant and have	best of my knowledge and belief and that I am (1) the owner of the st in the payment of taxes on that property - "The Applicant"), (2) an
SIGNATURE (Use Blue Pen - Original signature required on paper-filed application)	SIGNED AT (CITY, STATE) DATE
	BELLFLOWER, CA NOV 2 3 2022
DAVID L. GANGLOFF, JR.	
FILING STATUS (IDENTIFY RELATIONSHIP TO APPLICANT NAMED IN SECTION 1)	
✓ NOWNER MAGENT NATTORNEY SPOUSE REGISTERED DON	MESTIC PARTNER
CORPORATE OFFICER OR DESIGNATED EMPLOYEE	

BOE-305-AG (P1) REV. 03 (02-20)

AUTHORIZATION OF AGENT/ DESIGNATION OF ATTORNEY

May be filed with initial Assessment Appeal Application when naming an agent or when an agent or California attorney is being named when none was named in the initial application. Mail or fax the completed form to the Clerk of the Board at the address shown.

MENDOCINO County

	APPLICA	ANT AND PRO	PERT	Y INFORM\A	TION	
NAME OF APPLICANT (LAST, FIRST, MIDDLE INITIAL)				EMAIL ADD	RESS	
SAFEWAY INC / SAFEWAY STORES		VONS COMPA	NIES IN	С	Para	
MAILING ADDRESS OF APPLICANT (STREET ADDRESS	S OR P.O. BOX)					
250 E PARKCENTER BLVD	STATE	ZIP CODE	DAYTIM	E TELEPHONE	ALTERNATE TELEPHONE	FAX TELEPHONE
BOISE	ID	83706	()	()	()
SECURED: ASSESSORS PARCEL NUMBER		1	UI	VSECURED: ACCOU	NT OR TAX BILL NUMBER	
ALL PROPERTY IN COUNTY OF MEI	NDOCINO		AL	L PROPERTY	IN COUNTY OF MEI	NDOCINO
✓ AUTHORIZATION OF AGENT	DESIG	NATION OF CA	LIFOR	NIA ATTORNE	Y, STATE BAR NO	
If the applicant is a corporation, limited pemployee of the business entity.	partnership,	or limited liability	y compa	ny, the authoriz	zation must be signed b	y an officer or authorize
NAME OF AGENT OR ATTORNEY				1	EMAIL ADDRESS PTAAPPEALS@pro	perty-taxes.com
COMPANY NAME						
ALTUS GROUP U.S., INC.						
MAILING ADDRESS (STREET ADDRESS OR P.O.BOX)	^					
16600 WOODRUFF AVE., STE 200		ZIP CODE	DAYTIM	E TELEPHONE	ALTERNATE TELEPHONE	FAX TELEPHONE
BELLFLOWER	CA	90706	200 200000) 920-1864	()	(562) 920-5775
The above named person/company is he stipulated agreements, and otherwise set						
above.						
APPLICANT SIGNATURE			1	APPLICANT TITLE Property Tax	Manager	
APPLICANT NAME Aaron Barrett						DATE 8/15/2022
The remaining sections are req THIS AUTHORIZATION IS FOR CALENI Calendar Year is January 1 through Dece years indicated, limited to four consecutive CHECK AND INITIAL ONE The named agent is hereby authorize	DAR YEAR(mber 31. Th e calendar y	S): 2022 is authorization nears. See Rule 3	-2025 must be 6 805(a)(1)	completed for th	ne specific year in which	n the application is filed o
all assessments or property located Applicant must initial this	d within the	county owned by			Ů	
The named agent is hereby author specific property listed above or the	specific pro					ů ů
Applicant must initial this	statement.	CERTIFICATI	ON OF	AGENT		
I am an agent for the applicant filin	a the initial				certify that a copy of the	ne completed Assessmer
Appeal Application, attached to this I have been retained as the agent for	authorizatio	n, has been forwa	arded to	the applicant ne	amed in the application.	
If a copy of this form is being submitted, or	the form is		1 for			h original signatures upoi
request or any action being requested will be AGENT SIGNAPORE	e denied.		7;	PRINT AGENT NAME		
	~		1.0		LOFF, JR., EVP	
AGENT COMPANY NAME				MAIL ADDRESS		
ALTUS GROUP U.S., INC.			F	TAAppeals@	property-taxes.com	Ì



MENDOCINO COUNTY SECURED TAX STATEMENT FOR FISCAL YEAR JULY 1, 2022 THROUGH JUNE

FOR TAX YEAR 2022 - 2023

www.mendocinocounty.org/ttc

Print Date: 11/18/2022

PROPERTY INFORMATION

BILL NUMBER: 1332786

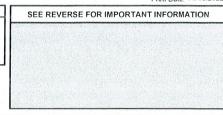
TAX RATE AREA: 001015 ACRES: 3.5600

PARCEL NUMBER: 0180303900 LOCATION: 660 S MAIN ST FORT BRAGG CA

LIEN DATE OWNER: SAFEWAY INC

SAFEWAY INC 1371 OAKLAND BLVD STE 200 WALNUT CREEK CA 94596

#0978





See reverse for electronic payment information

TELEPHONE NUMBERS

(707) 234-6875
(707) 234-6800
- Assertable and the state of the second of

(707) 234-6801 (707) 234-6800

Assessed Values Tax Rates **Personal Property**

Tax Collection

Exemptions

Address Change

(707) 234-6859

COUNTY VALUES AND EXEMPTIONS

VALUE DESCRIPTION	VALUE
Land	\$2,066,313
Structures	\$4,068,219
Business Personal Property	\$988,121
Net Value	\$7,122,653

(707) 234-6815

VOTER APPROVED TAXES, TAXING AGENCY DIRECT CHARGES AND SPECIAL ASSESSMENTS

TELEPHONE NUMBERS	DESCRIPTION	TAX RATE PERCENT	AGENCY TAXES/CHARGES
707-234-6859	County Wide Base Tax	1.000	\$71,226.52
707-961-2850	Fort Bragg Unified Bond	0.162	\$11,538.70
707-961-1234	Mendocino Cst Hospital BIR	0.013	\$925.95
707-476-4172	Mendo College/Rdwd JC Bond	0.010	\$712.27
707-961-2823	Fort Bragg City Fire Asmnt	0.000	\$22.00
510-725-2930	Mendo Coast Hosp Measure C	0.000	\$144.00

	DUE AND PAYABLE ON	11/01/2022
	1ST INSTALLMENT	42,284.72
Γ	DELINQUENT AFTER	12/12/2022

DUE AND PAYABLE ON	02/01/2023	
2ND INSTALLMENT	42,284.72	
DELINQUENT AFTER	04/10/2023	
	Charles Charles Control of the Control	No.

TOTAL TAXES 84,569.44

RETURN THIS STUB WITH YOUR PAYMENT

PLEASE MAKE CHECK PAYABLE TO: MENDOCINO COUNTY TAX COLLECTOR 501 Low Gap Rd, Room 1060 Ukiah, CA 95482

2ND INSTALLMENT PAYMENT CAN NOT BE ACCEPTED UNLESS THE 1ST INSTALLMENT HAS BEEN PAID

> ASSESSED TO ▼ SAFEWAY INC. 1371 OAKLAND BLVD STE 200 WALNUT CREEK CA 94596

▲ DETACH HERE ▲

2ND INSTALLMENT PAYMENT STUB

MENDOCINO COUNTY SECURED PROPERTY TAXES

PARCEL NUMBER	TAX RATE AREA	BILL NUMBER
0180303900	001015	1332786

2022 - 2023

42,284.72

42,284.72

IF PAID BY 04/10/2023 4.228.48 10% PENALTY

COST CHARGE

AFTER April 10, 2023 PAY THIS AMOUNT ▶ 46,533.20

00000020180303900004228472004653320008456944

RETURN THIS STUB WITH YOUR PAYMENT

PLEASE MAKE CHECK PAYABLE TO: MENDOCINO COUNTY TAX COLLECTOR **501** Low Gap Rd, Room 1060 Ukiah, CA 95482

TO PAY TOTAL TAX OF 84,569.44 RETURN **BOTH STUBS WITH PAYMENT BY** December 12, 2022

ASSESSED TO ▼

SAFEWAY INC 1371 OAKLAND BLVD STE 200 WALNUT CREEK CA 94596

▲ DETACH HERE ▲

1ST INSTALLMENT PAYMENT STUB

MENDOCINO COUNTY SECURED PROPERTY TAXES

PARCEL NUMBER TAX RATE AREA **BILL NUMBER** 0180303900 001015 1332786

ST

10% PENALTY 4.228.47

IF PAID BY

AFTER December 12, 2022 PAY THIS AMOUNT ▶ 46,513.19

12/12/2022

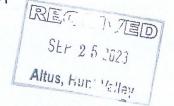


ASSESSMENT APPEALS BOARD **MENDOCINO COUNTY**

501 Low Gap Road, Room 1010 Ukiah, CA 95482

Telephone: (707) 463-4441

FAX: (707) 463-7237



ASSESSMENT APPEAL HEARING DATE CONFIRMATION NOTICE

Hearing Date/Time: 10/30/2023 1:30pm

Location: COUNTY ADMINISTRATION CENTER

Application Number(s): 22-0009

Parcel Number(s): 0180303900 Applicant: Safeway Inc	
	Please check one of the items shown below
() I will be present on the schee	duled hearing date.
() I wish to postpone or withdra	aw my application, and my signed form is attached.
I realize that if I, or my designated a application may be denied for lack of	agent, do not appear at the scheduled hearing time and date, my of appearance.
What Is My Obligation To Provide	Written Notice Of Intent to Appear At Hearing?
the hearing, by so specifying on and	icate his or her intention to appear and present an evidentiary case at d returning the Clerk of the Board's Assessment Appeal Hearing Date at least 30 days prior to the hearing date).
	eturn the form, then the Assessor will not be required to be prepared to should the applicant appear on the date of the hearing.
	Brent Buskirk. Altus Group U.S., Inc.
Applicant's Name (please print)	Agent's Name (please print)
Applicant's Signature	Agent's Signature
Applicant's Name (please print) Applicant's Signature	Altus Group U.S., Inc. Agent's Name (please print)

Please Return This Notice in the Envelope Provided to the Clerk of the Board By October 5, 2023



COUNTY OF MENDOCINOAssessment Appeals Board

DARCIE ANT CHIEF EXECUTIVE OFFICE CLERK OF THE BOAI

501 Low Gap Rd. Room 1010 Ukiah, CA 95482 Email: cobsupport@mendocinocounty.org Website: www.mendocinocounty.org

Office: (707) 463-4441 Fax: (707) 463-5649

APPLICATION WITHDRAWAL

Pursuant to Section 4831 of the Revenue and Taxation Code, taxpayers may withdraw his/her application from the appeals process. However, the Assessment Appeals Board is not required to accept withdrawal of an application for reduced assessment.

Should you decide to withdraw your application(s), please notify the Executive Office promptly by completing and returning this form to:

Mendocino County Executive Office

501 Low Gap Road, Room 1010

Ukiah, CA. 95482

Attn: Atlas Pearson, Senior Deputy Clerk of the Board

I hereby request a continuance of the following application(s) for changed assessment: (To be completed by Applicant)
NAME: SAFEWAY INC
ADDRESS: 660 S Main St, Fort Bragg
APN/Account No.: 0180303900
TAX YEAR PROTESTED: 2022/2023
TYPE OF ASSESSMENT: REGULAR Supplemental Other:
PROTEST/APPLICATION No.: 22-0009
DATE: 10/17/23 APPLICANT'S SIGNATURE (Original Required)

BOE-305-AH (P1) REV. 08 (01-15)

ASSESSMENT APPEAL APPLICATION

This form contains all of the requests for information that are required for filing an application for changed assessment. Failure to complete this application may result in rejection of the application and/or denial of the appeal. Applicants should be prepared to submit additional information if requested by the assessor or at the time of the hearing. Failure to provide information at the hearing the appeals board considers necessary may result in the continuance of the hearing or denial of the appeal. Do not attach hearing evidence to this application.



APPLICATION NUMBER: Clerk Use Only

COUNTY OF MENDOCINO
ASSESSMENT APPEALS BOARD
501 Low Gap Road • Room 1010
Ukiah, California 95482
TELEPHONE: (707) 463-4221
FAX: (707) 463-7237

1. APPLICANT INFORMATION - PLEASE PRINT				22-0010		
NAME OF APPLICANT (LAST, FIRST, MIDDLE INITIAL), BUSINESS OR TRUST NAME				EMAIL ADDRESS		
THE VONS COMPANIES INC MAILING ADDRESS OF APPLICANT (STREET ADDRESS OR	P O BOXI					
250 E PARKCENTER BLVD						
BOISE	STATE ZIP CODE 83706		E TELEPHONE	ALTERNATE TELEPHONE	FAX TELEPHONE	
2. CONTACT INFORMATION - AGENT, ATT			LICANT if ap	plicable - (REPRESEN	TATION IS OPTIONAL)	
NAME OF AGENT, ATTORNEY, OR RELATIVE (LAST, FIRST GANGLOFF, DAVID L. JR.		12, 5-111-011	•	E-MAIL ADDRESS PTAAPPEALS@PROPER		
COMPANY NAME ALTUS GROUP U.S., INC.						
CONTACT PERSON IF OTHER THAN ABOVE (LAST, FIRST, I BUSKIRK, DAVID B (BRENT)	MIDDLE INITIAL)	0 11 10 10 10 10			2 (A) (CRE) () ()	
MAILING ADDRESS (STREET ADDRESS OR P. O. BOX) 16600 WOODRUFF AVE., SUITE 200	1			1. 4. 63	- Lister of Markey, Land	
BELLFLOWER	STATE ZIP CODE 90706		e telephone 2) 282-5926	ALTERNATE TELEPHONE (562) 282-5905 (Adn	. 500 : 000 5775	
AUTHORIZATION OF AGENT	⊠ AU1	THORIZATION	ON ATTACHE	D	ni isizanan en eta isi	
The following information must be comple					gent is a licensed California	
attorney as indicated in the Certification s applicant is a business entity, the agent's						
The person named in Section 2 above is henter in stipulation				application, and may i		
SIGNATURE OF APPLICANT, OFFICER, OR AUTHORIZED EI			ITLE	and approx	DATE	
3. PROPERTY IDENTIFICATION INFORMA ☐ Yes ☑ No Is this property a single-face.		upied as the p	rincipal place of	residence by the owner?		
ENTER APPLICABLE NUMBER FROM YOU						
ASSESSOR'S PARCEL NUMBER 006-160-3300	ASSESSMENT NUI	MBER		FEE NUMBER		
ACCOUNT NUMBER	TAX BILL NUMBER	₹	200	3 11 7		
	1306522			DOING DUCINECO AC (DD	A) ifi-t-	
PROPERTY ADDRESS OR LOCATION 845 S MAIN ST WILLITS				DOING BUSINESS AS (DBA), if appropriate THE VONS COMPANIES INC #0965		
PROPERTY TYPE ✓			-			
SINGLE-FAMILY / CONDOMINIUM / TOWN	HOUSE / DUPLEX	□ AGR	ICULTURAL	☐ POSSE	ESSORY INTEREST	
☐ MULTI-FAMILY/APARTMENTS: NO. OF UN		_	UFACTURED H		NT LAND	
□ Modern Management			ER CRAFT	☐ AIRCR		
BUSINESS PERSONAL PROPERTY/FIXTU	IRES	□ ОТН				
4. VALUE	A. VALUE ON RO	DLL	B. APPLICAN	T'S OPINION OF VALUE	C. APPEALS BOARD USE ONL	
LAND		443,698		221,849		
IMPROVEMENTS/STRUCTURES		1,215,793		607,897		
FIXTURES		L. L. K.	N.			
PERSONAL PROPERTY (see instructions)		677,768		338,884		
MINERAL RIGHTS			~		5	
TREES & VINES				S Section 1 Section 1		
OTHER					F 7.50	
TOTAL		2,337,259		1,168,630		
PENALTIES (amount or percent)						

BOE-305-AH (P2) REV. 08 (01-15)	
5. TYPE OF ASSESSMENT BEING APPEALED Check only one. See it	nstructions for filing periods
☑ REGULAR ASSESSMENT - VALUE AS OF JANUARY 1 OF THE	CURRENT YEAR
☐ SUPPLEMENTAL ASSESSMENT	
*DATE OF NOTICE: **ROLL YEAR:	
	MITY REASSESSMENT PENALTY ASSESSMENT
*DATE OF NOTICE: **ROLL YEAR:	h roll year requires a separate application
	ions before completing this section.
If you are uncertain of which item to check, please check "I. OTHER" and provided the reasons that I rely upon to support requested changes in value are as A. DECLINE IN VALUE The assessor's roll value exceeds the market value as of Januar B. CHANGE IN OWNERSHIP 1. No change in ownership occurred on the date of	provide a brief explanation of your reasons for filing this application. Follows: y 1 of the current year.
1. No change in ownership occurred on the date of 2. Base year value for the change in ownership established on the	
	date of is incorrect.
C. NEW CONSTRUCTION 1. No new construction occurred on the date of	
2. Base year value for the completed new construction established	on the date of is incorrect.
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Assessor's reduced value is incorrect for property damaged by r	
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2. Assessment of other property of the assessee at the location	is incorrect.
I. OTHER	
Explanation (attach sheet if necessary)	
7. WRITTEN FINDINGS OF FACTS (\$ per) ☐ Are requested. ☒ Are not requested.	
8. THIS APPLICATION IS DESIGNATED AS A CLAIM FOR REFUND Se	e instructions.
CERTIFICAT	ION
I certify (or declare) under penalty of perjury under the laws of the State of C accompanying statements or documents, is true, correct, and complete to the property or the person affected (i.e., a person having a direct economic intereagent authorized by the applicant under item 2 of this application, or (3) and Number, who has been retained by the applicant and have	e best of my knowledge and belief and that I am (1) the owner of the st in the payment of taxes on that property - "The Applicant"), (2) an
SIGNATURE (Use Blue Pen - Original signature required on paper-filed application)	SIGNED AT (CITY, STATE) RELLELOW/FR CA
NAME (Please Print)	BELLFLOWER, CA
DAVID L. GANGLOFF, JR.	
FILING STATUS (IDENTIFY RELATIONSHIP TO APPLICANT NAMED IN SECTION 1)	
✓ OWNER MAGENT ATTORNEY SPOUSE REGISTERED DO CORPORATE OFFICER OR DESIGNATED EMPLOYEE	MESTIC PARTNER

AUTHORIZATION OF AGENT/ DESIGNATION OF ATTORNEY

May be filed with initial Assessment Appeal Application when naming an agent or when an agent or California attorney is being named when none was named in the initial application. Mail or fax the completed form to the Clerk of the Board at the address shown.

MENDOCINO County

	APPLICA	NT AND PRO	DPERTY	INFORMIA.	TION		
NAME OF APPLICANT (LAST, FIRST, MIDDLE INITIAL)				EMAIL ADDR	RESS		
SAFEWAY INC / SAFEWAY STORES	INC / THE V	ONS COMPA	NIES INC	:			
MAILING ADDRESS OF APPLICANT (STREET ADDRES	S OR P.O BOX)						
250 E PARKCENTER BLVD						72	
BOISE		ZIP CODE 83706	DAYTIME	TELEPHONE	ALTERNATE TELEPHONE ()	FAX TELEPHONE	
SECURED: ASSESSORS PARCEL NUMBER		00100	UNS	SECURED: ACCOUNT	NT OR TAX BILL NUMBER	/ /	
ALL PROPERTY IN COUNTY OF ME	NDOCINO		ALI	PROPERTY	IN COUNTY OF ME	NDOCINO	
AUTHORIZATION OF AGENT		DESIGNATION OF CALIFORNIA ATTORNEY, STATE BAR NO					
If the applicant is a corporation, limited employee of the business entity.	partnership, c	r limited liabilit	y compan	y, the authoriz	zation must be signed b	y an officer or authorize	
NAME OF AGENT OR ATTORNEY				1	EMAIL ADDRESS PTAAPPEALS@prop	perty-taxes.com	
COMPANY NAME							
ALTUS GROUP U.S., INC.							
MAILING ADDRESS (STREET ADDRESS OR P.O.BOX)	^						
16600 WOODRUFF AVE., STE 20		ZIP CODE	DAYTILE	TELEPHONE	ALTERNATE TELEPHONE	FAX TELEPHONE	
CITY BELLFLOWER	CA	90706		920-1864	/ \	(562) 920-5775	
The above named person/company is he					n and may inspect Asse		
stipulated agreements, and otherwise set above. APPLICANT SIGNATURE	tle issues rela	ating to this app		any Assessm	ent Appeal Application	in this county as indicate	
> Cubin			10.7	Property Tax	Manager		
APPLICANT NAME Aaron Barrett						DATE 8/15/2022	
THIS AUTHORIZATION IS FOR CALEN Calendar Year is January 1 through Deceyears indicated, limited to four consecutiv CHECK AND INITIAL ONE The named agent is hereby authorial assessments or property locate Applicant must initial this specific property listed above or the Applicant must initial this	mber 31. This e calendar ye zed to file Ass d within the costatement.	e authorization rars. See Rule 3 essment Appea ounty owned by	305(a)(1)(al Applicati y this appl	B). ion and transacticant. cation and tran	ct all business relating to	o such filings on <i>any and</i> ng to such filings on the	
		CERTIFICATI	ION OF A	GENT			
I am an agent for the applicant filin Appeal Application, attached to this	authorization	, has been forw	arded to t	he applicant na	amed in the application.	ne completed Assessme	
I have been retained as the agent	• •						
If a copy of this form is being submitted, o request or any action being requested will be		eing submitted			uce the original form wit	h original signatures upo	
AGENT SIGNATURE	~		1	RINT AGENT NAME AVID GANG	LOFF, JR., EVP		
AGENT COMPANY NAME				MAIL ADDRESS			
ALTUS GROUP U.S., INC.			IP.	I AAppeals@	property-taxes.com		



MENDOCINO COUNTY SECURED TAX STATEMENT FOR FISCAL YEAR JULY 1, 2022 THROUGH JUNE

FOR TAX YEAR 2022 - 2023

PROPERTY INFORMATION

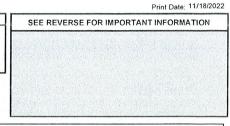
BILL NUMBER: 1306522

TAX RATE AREA: 004011 ACRES:

PARCEL NUMBER: 0061603300 LOCATION: 845 S MAIN ST WILLITS CA LIEN DATE OWNER: VONS COMPANIES INC THE

> VONS COMPANIES INC THE 1371 OAKLAND BLVD STE #200 WALNUT CREEK CA 94596

6965





COUNTY VALUES AND EXEMPTIONS

See reverse for electronic payment information

TELEPHONE NUMBERS

Tax Collection

Exemptions

Tax Rates

Address Change

Assessed Values

Personal Property

(707) 234-6875
(707) 234-6800
(707) 234-6801
(707) 234-6800
(707) 234-6859

(707) 234-6815

VALUE DESCRIPTION **VALUE** \$443,698 Land Structures \$1,215,793 **Business Personal Property** \$677,768 Net Value \$2,337,259

VOTER APPROVED TAXES, TAXING AGENCY DIRECT CHARGES AND SPECIAL ASSESSMENTS TELEPHONE NUMBERS DESCRIPTION TAX RATE PERCENT AGENCY TAXES/CHARGES County Wide Base Tax 707-234-6859 1.000 \$23.372.59

707-468-3068	Mendocino-Lake CC Bond	0.024	\$560.94
707-459-5314	Willits Unified Bond	0.048	\$1,121.89
707-459-6271	Little Lake Fire Asmnt	0.000	\$600.00
707-459-6271	Little Lake Fire Measure J	0.000	\$390.00
707-459-7113	Willits Sewer Assessment	0.000	\$9,758.80

Г	DUE AND DAVADLE ON	44/04/2022	DUE AND DAVABLE ON	02/04/2022	
L	DUE AND PAYABLE ON	11/01/2022	DUE AND PAYABLE ON	02/01/2023	
	1ST INSTALLMENT	17,902.11	2ND INSTALLMENT	17,902.11	TOTAL TAXES
	DELINQUENT AFTER	12/12/2022	DELINQUENT AFTER	04/10/2023	35,804.22

RETURN THIS STUB WITH YOUR PAYMENT

PLEASE MAKE CHECK PAYABLE TO: MENDOCINO COUNTY TAX COLLECTOR 501 Low Gap Rd, Room 1060 Ukiah, CA 95482

2ND INSTALLMENT PAYMENT CAN NOT BE ACCEPTED UNLESS THE 1ST INSTALLMENT HAS BEEN PAID.

> ASSESSED TO ▼ VONS COMPANIES INC THE 1371 OAKLAND BLVD STE #200 WALNUT CREEK CA 94596

▲ DETACH HERE ▲

2ND INSTALLMENT PAYMENT STUB

MENDOCINO COUNTY SECURED PROPERTY TAXES

PARCEL NUMBER	TAX RATE AREA	BILL NUMBER
0061603300	004011	1306522

2022 - 2023

IF PAID BY 04/10/2023 17,902.11

1,790.21 10% PENALTY 20.00 COST CHARGE

AFTER April 10, 2023 PAY THIS AMOUNT ▶ 19,712.32

00000020061603300001790211001971232003580422

RETURN THIS STUB WITH YOUR PAYMENT

PLEASE MAKE CHECK PAYABLE TO: MENDOCINO COUNTY TAX COLLECTOR 501 Low Gap Rd, Room 1060 Ukiah, CA 95482

TO PAY TOTAL TAX OF 35,804.22 RETURN **BOTH STUBS WITH PAYMENT BY** December 12, 2022

ASSESSED TO ▼

VONS COMPANIES INC THE 1371 OAKLAND BLVD STE #200 WALNUT CREEK CA 94596

▲ DETACH HERE ▲

1ST INSTALLMENT PAYMENT STUB

MENDOCINO COUNTY SECURED PROPERTY TAXES

PARCEL NUMBER	TAX RATE AREA	BILL NUMBER
0061603300	004011	1306522
Annual Communication of the Co	20. 6	to the the state of the state

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2022 - 2023

IF PAID BY 12/12/2022 17,902.11

10% PENALTY 1,790.21

AFTER December 12, 2022 PAY THIS AMOUNT ▶ 19,692.32



ASSESSMENT APPEALS BOARD MENDOCINO COUNTY

501 Low Gap Road, Room 1010 Ukiah, CA 95482 Telephone: (707) 463-4441 FAX: (707) 463-7237

ASSESSMENT APPEAL HEARING DATE CONFIRMATION NOTICE

- 1VED 2023

Hearing Date/Time: 10/30/2023 1:30pm

Location: COUNTY ADMINISTRATION CENTER

Application Number(s): 22-0010 Parcel Number(s): 0061603300 Applicant: The Vons Companies Inc

Applicant's Name (please print)

Applicant's Signature

Please check one of the items shown below.
(V) I will be present on the scheduled hearing date.
() I wish to postpone or withdraw my application, and my signed form is attached.
I realize that if I, or my designated agent, do not appear at the scheduled hearing time and date, my application may be denied for lack of appearance.
What Is My Obligation To Provide Written Notice Of Intent to Appear At Hearing?
The applicant must affirmatively indicate his or her intention to appear and present an evidentiary case at the hearing, by so specifying on and returning the Clerk of the Board's Assessment Appeal Hearing Date Confirmation Notice (to be received at least 30 days prior to the hearing date).
If the applicant does not so timely return the form, then the Assessor will not be required to be prepared to present a case on the hearing date, should the applicant appear on the date of the hearing.
Brent Buskirk Athus Group U.S., Inc.

Please Return This Notice in the Envelope Provided to the Clerk of the Board By October 5, 2023

Agent's Name (please print)



COUNTY OF MENDOCINOAssessment Appeals Board

DARCIE ANT CHIEF EXECUTIVE OFFIC CLERK OF THE BOA

501 Low Gap Rd. Room 1010 Ukiah, CA 95482

Email: cobsupport@mendocinocounty.org Website: www.mendocinocounty.org

Office: (707) 463-4441 Fax: (707) 463-5649

APPLICATION WITHDRAWAL

Pursuant to Section 4831 of the Revenue and Taxation Code, taxpayers may withdraw his/her application from the appeals process. However, the Assessment Appeals Board is not required to accept withdrawal of an application for reduced assessment.

Should you decide to withdraw your application(s), please notify the Executive Office promptly by completing and returning this form to:

Mendocino County Executive Office

501 Low Gap Road, Room 1010

Ukiah, CA. 95482

Attn: Atlas Pearson, Senior Deputy Clerk of the Board

I hereby request a continuance of the following application(s) for changed assessment: (To be completed by Applicant)
NAME:THE VONS COMPANIES INC
ADDRESS: 845 S Main St, Willits
APN/Account No.: 0061603300
Tax Year Protested: 2022/2023
TYPE OF ASSESSMENT: REGULAR Supplemental Other:
PROTEST/APPLICATION No.: 22-0010
DATE: 10/17/23
APPLICANT'S SIGNATURE (Original Required)

ASSESSMENT APPEAL APPLICATION 75.00 Lines for Contains all of the requests for Information that are required for filing an application for changed assessment. Failure to complete this application may result in rejection of the application and/or denial of the appeal. Applicants should be prepared to submit additional information if requested by the assessor or at the time of the hearing. Failure to provide information at the hearing the appeals board considers necessary may result in the



COUNTY OF MENDOCINO
ASSESSMENT APPEALS BOARD
501 Low Gap Road • Room 1010
Uklah, California 95482
TELEPHONE: (707) 463-4221
FAX: (707) 463-7237

continuance of the hearing or denial of the application.					APPI	LICATION NU!	ABER:	: Clerk U	se Only
APPLICANT INFORMATION - PLEASE P	RINT								
IAME OF APPLICANT (LAST, FIRST, MIDDLE INITIAL), BUSII	VESS, OR TRUS	ST NAME				ADDRESS			
Dowell Tyler wiling address of applicant (street address or 2424 Ridge Rd	P.O. BOX)	,				rell@keatax.c			
NTY		ZIP CODE	DAYTIM	298-1760	ALT	ERNATE TELEPH	ONE	PAX TEL	PHONE
Rockwall L CONTACT INFORMATION - AGENT, ATT		75087				_/DEDGESEI	JTATI	ONISO	PTIONALL
AME OF AGENT, ATTORNEY, OR RELATIVE (LAST, FIRST,			UFAFFE	CHIAL II GDD	EMAIL A	DORESS		<u> </u>	- HOHAS/
lowell Tyler	liken sastaan toresa t				IW	atts@keatax.	com		
OMPANY NAME KE Andrews									
ONTACT PERSON IF OTHER THAN ABOVE (LAST, FIRST, I	I:DOLE INTITAL	1							
AILINGADORESS (STREET ADDRESS OR P. O. BOX)									
2424 Ridge Rd									
ITY		ZIP CODE	DAYTIM	ETELEPHONE	ALT	ERNATE TELEPH	ONE	FAX TEL	EPHONE
Rockwall	TX	75087 X AUTHO)298-1760	(10	<u> </u>
The following information must be complete attorney as indicated in the Certification se applicant is a business entity, the agent's a The person named in Soction 2 above is he	ction, or a uthorizatio	spouse, child n must be sig	d, parent, i gned by an	egistered do officer or au	mestic i ithorize	partner, or the d employee of	perso the b	on affect usiness.	ed. If the
enter in stipulation	agreements		rise settle	ssues relatio					
SIGNATURE OF APPLICANT, OFFICER, OR AUTHORIZED E	MPLOYEE			The	Ma	~0911			11/2/1/2
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PROPERTY IDENTIFICATION INCORMA	OON			100		· 44.			1-: //-
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BOE-305-AH (P2 REV. 08 (01-15)		
5. TYPE OF ASSESSMENT BEING APPEALED	See instructions for filing periods	
X REGULAR ASSESSMENT – VALUE AS OF JANUARY 1 OF 1	THE CURRENT YEAR	
☐ SUPPLEMENTAL ASSESSMENT		
*DATE OF NOTICE: ROLL YEAR:	<u> Parada da </u>	
□ ROLL CHANGE □ ESCAPE ASSESSMENT □ CALA *DATE OF NOTICE: **ROLL YEAR:	AMITY REASSESSMENT PENALTY ASSESSI	MENT
*Must attach copy of notice or bill, where applicable **E	ach roll year requires a senarate application	
	ructions before completing this section.	
If you are uncertain of which item to check, please check "I. OTHER" a The reasons that I rely upon to support requested changes in value are A. DECLINE IN VALUE [X] The assessor's roll value exceeds the market value as of Ja	and provide a brief explanation of your reasons for filing e as follows:	this application
B. CHANGE IN OWNERSHIP		
1. No change in ownership occurred on the date of		
2. Base year value for the change in ownership established	on the date of is incorrect.	
C. NEW CONSTRUCTION		
1. No new construction occurred on the date of		
 2. Base year value for the completed new construction established. 		ect.
3. Value of construction in progress on January 1 is incorrect	I.	
D. CALAMITY REASSESSMENT	h., misfant	
 Assessor's reduced value is incorrect for property damaged BUSINESS PERSONAL PROPERTY/FIXTURES. Assessor's value 1. All personal property/fixtures. 		rket value.
 2. Only a portion of the personal property/fixtures. Attach des 	scription of those items	
F. PENALTY ASSESSMENT	somption of those forms.	
Penalty assessment is not justified.		
G. CLASSIFICATION/ALLOCATION		
1. Classification of property is incorrect.		
2. Allocation of value of property is incorrect (e.g., between la		
 H. APPEAL AFTER AN AUDIT. Must include description of each pr 1. Amount of escape assessment is incorrect. 	operty, issues being appealed, and your opinion of va	alue.
2. Assessment of other property of the assessee at the locat	ion is incorrect	
I. OTHER	ion is incorrect.	
Explanation (attach sheet if necessary)		
7. WRITTEN FINDINGS OF FACTS (\$		
☐ Are requested.		
8. THIS APPLICATION IS DESIGNATED AS A CLAIM FOR REFUND	See instructions	
Yes X No	nee mad dedons.	
CERTIFIC	CATION	
I certify (or declare) under penalty of perjury under the laws of the State		n including an
accompanying statements or documents, is true, correct, and complete to	the best of my knowledge and belief and that I am (1) to	the owner of the
property or the person affected (i.e., a person having a direct economic in agent authorized by the applicant under item 2 of this application, or (3)	terest in the payment of taxes on that property - "The Ap	oplicant"), (2) a
	nd has been authorized by that person to file this applica	
SIGNATURE: (Use Blue Pen Original signature required on paper-filed application)	SIGNED AT (CITY, STATE) DAT	
> //Class		1/28/22
NAME (Please Print) Tyler Dowell		
FILING STATUS (IDENTIFY RELATIONSHIP TO APPLICANT NAMED IN SECTION 1)	OMESTIC PARTNER III CHIII DIIII PARENT III PERSON	N AFFECTED

□ CORPORATE OFFICER OR DESIGNATED EMPLOYEE

Katrina Bartolomie Mendocino County Assessor/ Clerk/Recorder

CONTACT INFORMATION

2022-23 INFORMAL REQUEST FOR DECLINE IN MARKET VALUE PROP 8 REASSESSMENT

501 Low Gap Rd., Rm. 1020 Ukiah, CA 95482 Phone: 707-234-6800 Fax: 707-463-6597

California State Revenue and Taxation Code, Section 51 authorizes the Assessor to temporarily lower the assessed value of any real property when it is greater than the market value as of the January 1, lien date. If you have evidence that the market value of your property as of January 1, 2022 is less than the assessed value, please provide the information below and return this request to the Assessor's Office. If you have any questions please contact our office at 707-234-6800.

This form allows you to request a review of the assessment of your property due to a decline-in-value. Please provide evidence to support your opinion of value as of January 1, 2022. A simple statement that property values have declined is not sufficient to justify a reduction. The best evidence or support includes information on sales of comparable properties. You should select three comparable properties that sold as close to January 1, 2022 as possible, but no later than March 31, 2022. (Comparable sales between July 2021 and March 2022 are best)

PROPERTY INFORMATION

Name Tyler I				Assessor's Parcel Number	
Mailir	ng Address Ridge Rd		elikke kalakup gundanabaana can	Property Address 610 S State Street	
City/S Uklah,	tate/Zip CA		-A-S-LEGISTON PMPROSESSO	City/State/Zip Uklah, CA	
	me Telephone 98-1760			Assessed Value (from tax bi \$2,359,386	ill)
	il Address Skeatax.com			Date of Purchase	
Your	Opinion of Value as of Ja	anuary 1, 2022		Purchase Price	
		COI	MPARABLE	PROPERTY INFORMATION	
Sale	Address or Assessor's Parcel Number	Sale Date (No later than) 3/31/2022)	Sale Price \$	Single Family Include bldg. size, yr. built, # of bedrooms, baths, proximity	cription <u>Commercial/Industrial</u> Include bldg. &
	2 47 007 14411001			Multi Residence # of units and income	land size, use, zoning, yr. built, proximity & income
1					land size, use, zoning, yr. built, proximity & income
1 2					land size, use, zoning, yr. built, proximity & income

IMPORTANT - SIGNATURE

Your property taxes are still due by the delinquent date printed on the bill from the Tax Collector. The filing of an assessment review or an assessment appeal does not alter or delay the date taxes are due. The Tax Collector will add interest and penalties to the amount you owe if your payment is late.

I have read and understood the statement above. I agree to allow the Assessor's staff to inspect the property, including the interior of any improvements, if necessary. (An Appraiser will call to schedule an appointment, if needed).

Signature Title (Owner, Agent, etc) Date

<u>Preserve your appeal rights</u>. If you disagree with the Assessor's findings resulting from this application, you have formal appeal rights pertaining to your original assessment if an Application for Changed Assessment is filed timely. To obtain an application you need to contact the Clerk of the Assessments Appeals Board at 707-463-4221.

Please Note. The Assessment Appeal Filing period is from July 2 through November 30, 2022.

<u>Protect your appeal rights.</u> Appeals must be postmarked by the deadline regardless of the status of this separate "Request For Decline In Market Value."



OCT 12'28 PM3:27 REC'D BOARD OF SUPERVI

ASSESSMENT APPEALS BOARD **MENDOCINO COUNTY**

501 Low Gap Road, Room 1010 Ukiah, CA 95482 Telephone: (707) 463-4441 FAX: (707) 463-7237

ASSESSMENT APPEAL HEARING DATE CONFIRMATION NOTICE

Hearing Date/Time: 10/30/2023 1:30pm

Location: COUNTY ADMINISTRATION CENTER

Application Number(s): 22-0015

Parcel Number(s): 0023014600 Applicant: Tyler Dowell	
Please check one of the ite	ems shown below.
() I will be present on the scheduled hearing date.	
() I wish to postpone or withdraw my application, and	my signed form is attached.
I realize that if I, or my designated agent, do not appear at application may be denied for lack of appearance.	the scheduled hearing time and date, my
What Is My Obligation To Provide Written Notice Of Inte	ent to Appear At Hearing?
The applicant must affirmatively indicate his or her intention the hearing, by so specifying on and returning the Clerk of Confirmation Notice (to be received at least 30 days prior to the confirmation of t	the Board's Assessment Appeal Hearing Date
If the applicant does not so timely return the form, then the present a case on the hearing date, should the applicant a	
Applicant's Name (please print)	Eric Hoefler Agent's Name (please print)
	aria Hospen
Applicant's Signature	Agent's Signature

Please Return This Notice in the Envelope Provided to the Clerk of the Board By October 5, 2023



September 14, 2023

KE Andrews Tyler Dowell 2424 Ridge Road Rockwell, TX 75087

Regal # 051813

Katrina Bartolomie Mendocino County Assessor, County Clerk, Recorder 501 Low Gap Road, Room 1020 Ukiah, CA 95482

ASSESSMENT APPEALS BOARD

MENDOCINO COUNTY
501 Low Gap Road, Room 1010

Telephone: (707) 463-4441 FAX: (707) 463-7237

Ukiah, CA 95482

Reference:

Application Number: 22-0015

Parcel Number: 0023014600 Applicant: Tyler Dowell

Hearing:

Assessment Appeals

Date/Time: 10/30/2023 1:30pm

Location: COUNTY ADMINISTRATION CENTER 501 Low Gap Road, Room 1070

NOTICE IS HEREBY GIVEN THAT the Mendocino County Assessment Appeals Board (AAB) has set the above-referenced application for hearing at the above-stated date, time, and location.

The AAB is required to find the full value of the property from the evidence presented at the hearing. The AAB can raise, under certain circumstances, as well as lower or confirm the assessment being appealed. An application for a reduction in the assessment of a portion of an improved real property (e.g., land only or improvements only) or a portion of installations which are partly real property and partly personal property (e.g., only the improvement portion or only the personal property portion of machinery and equipment) may result in a reappraisal of all property of the applicant at the site which may result in an increase in the unprotested assessment of the other portion or portions of the property, which increase will offset, in whole or part, any reduction in the protested assessment.

There is a minimum deposit fee of \$250 (per application) for applicants requesting Written Finding of Facts. This fee must be received by the Clerk of the Board prior to your scheduled hearing date. Additionally, a \$131 per hour fee for staff time may be assessed. Checks should be made payable to the County of Mendocino and must list the parcel APN number on the check. Each individual application requires a separate check.

It is requested that you return the enclosed letter confirming your intention to appear at the hearing at least 30 days prior to the hearing. We should receive your response by September 30, 2023. If you have already filed a Withdrawal Form or Postponement Form with the Clerk of the Board, no further action on your part is necessary at this time. If you have any questions, please contact the Clerk of the Assessment Appeals Board.

Dated:

Darcie Antle

September 14, 2023

Clerk of the Board

By: Atlas M.A. Pearson Senior Deputy Clerk of the Assessment Appeals Board

Enclosures: Hearing Date Confirmation Notice

Application Withdrawal Form Application Postponement Form





COUNTY OF MENDOCINOAssessment Appeals Board

DARCIE ANTLE CHIEF EXECUTIVE OFFICER CLERK OF THE BOARD

501 Low Gap Rd. Room 1010 Ukiah, CA 95482 Email: cobsupport@mendocinocounty.org Website: www.mendocinocounty.org

Office: (707) 463-4441 Fax: (707) 463-5649

APPLICATION WITHDRAWAL

Pursuant to Section 4831 of the Revenue and Taxation Code, taxpayers may withdraw his/her application from the appeals process. However, the Assessment Appeals Board is not required to accept withdrawal of an application for reduced assessment.

Should you decide to withdraw your application(s), please notify the Executive Office promptly by completing and returning this form to:

Mendocino County Executive Office

501 Low Gap Road, Room 1010

Ukiah, CA. 95482

Attn: Atlas Pearson, Senior Deputy Clerk of the Board

I hereby request a continuance of the following application(s) for changed assessment: (To be completed by Applicant)					
NAME: Tyler Dowell					
ADDRESS: 2424 Ridge Rd, Rockwall TX 75087					
APN/Account No.: 0023014600					
TAX YEAR PROTESTED: 2022					
TYPE OF ASSESSMENT: REGULAR SUPPLEMENTAL OTHER:					
PROTEST/APPLICATION No.: 22-0015					
DATE: 10/16/2023 APPLICANT'S SIGNATURE (Original Required)					

PENALTIES (amount or percent)

ASSESSMENT APPEAL APPLICATION

This form contains all of the requests for information that are required for filing an application for changed assessment. Failure to complete this application may result in rejection of the application and/or denial of the appeal. Applicants should be prepared to submit additional information if requested by the assessor or at the time of the hearing. Failure to provide information at the hearing the appeals board considers necessary may result in the



COUNTY OF MENDOCINO ASSESSMENT APPEALS BOARD 501 Low Gap Road • Room 1010 Ukiah, California 95482 TELEPHONE: (707) 463-4221

Fax: (707) 463-7237

continuance of the hearing or denial of the ap attach hearing evidence to this application.	peal. Do not				APPLIC	ATION NUME	BER: Clerk	Use Only
1. APPLICANT INFORMATION - PLEASE F	PRINT				2	2 - 00	01	
NAME OF APPLICANT (LAST, FIRST, MIDDLE INITIAL), BUSINESS, OR TRUST NAME					email Address amy.kotschedoff@versataxconsu			
Tesla Energy Operations Inc MAILING ADDRESS OF APPLICANT (STREET ADDRESS O	R P.O. BOX)				amy.ko	otscnedott(@versata:	xconsulting.com
12832 S. Frontrunner Blvd #100			DAVE	ME TELEBUONE	lu TEDA	LATE TELEBUION	EAV TE	T EDUCATE
Draper	UT 84020		DAY I))	())	E FAX IE	LEPHONE)
2. CONTACT INFORMATION - AGENT, ATT		IVE OF	APP	LICANT if appl			TATION IS	OPTIONAL)
NAME OF AGENT, ATTORNEY, OR RELATIVE (LAST, FIRST	T, MIDDLE INITIAL)				email addr		Dversatax	consulting.com
Kotschedoff, Amy					1			<u> </u>
Versatax Consulting CONTACT PERSON IF OTHER THAN ABOVE (LAST, FIRST,	MIDDLE INTITAL)							
MAILING ADDRESS (STREET ADDRESS OR P. O. BOX)								
23052 Alicia Parkway #H-372								
Mission Viejo	STATE ZIP CODE CA 9269	2		10) 650-192		ATE TELEPHON		6)390-1076
AUTHORIZATION OF AGENT The following information must be complet attorney as indicated in the Certification s applicant is a business entity, the agent's	ed (or attached to this ection, or a spouse, a authorization must b	s applic child, p e signe	ation arent, ed by a	registered don an officer or aut	ns) unless nestic part horized en	tner, or the p nployee of ti	erson affec he busines:	cted. If the
The person named in Section 2 above is he enter in stipulation	ereby authorized to a agreements, and otl						t assessor'	s records,
SIGNATURE OF APPLICANT, OFFICER, OR AUTHORIZED B	EMPLOYEE			TITLE				DATE
☐ YES ☑ NO Is this property a single	le-family dwelling that is UR NOTICE/TAX BII		ed as ti	ne principal place	of residenc	e by the owne	ır?	
ASSESSOR'S PARCEL NUMBER	ASSESSMENT NU	IMBER			FEE NUMBER			
ACCOUNT NUMBER	TAX BILL NUMBER	₹						
0410026900003 PROPERTY ADDRESS OR LOCATION	23889				DOING BU	SINESS AS (DI	PA) if approp	rioto
THE ENTINEER OF EGAMEN					DOING BO	0114E00 A0 (DI	ьку, п арргор	nate
PROPERTY TYPE 🕁								
□ SINGLE-FAMILY / CONDOMINIUM / TOW	NHOUSE / DUPLEX		AGR	ICULTURAL		□ POSSE	ESSORY IN	TEREST
□ MULTI-FAMILY/APARTMENTS: NO. OF U	NITS		MAN	UFACTURED H	OME	□ VACAN	NT LAND	
□ COMMERCIAL/INDUSTRIAL			WAT	ER CRAFT		□ AIRCR	AFT	
☑ BUSINESS PERSONAL PROPERTY/FIXT	URES		ОТН	ER:				
4. VALUE	A. VALUE ON	ROLL		B. APPLICANT	S OPINION	OF VALUE	C. APPEA	LS BOARD USE ONL
LAND								
IMPROVEMENTS/STRUCTURES								
FIXTURES								
PERSONAL PROPERTY (see instructions)	813,338			406,000				
MINERAL RIGHTS								
TREES & VINES								
OTHER								
TOTAL	813,338			406,000				

BOE-305-AH (P2 REV. 08 (01-15)		
5. TYPE OF ASSESSMENT BEING APPEALED **Check only one. See		
ot iggredge REGULAR ASSESSMENT – VALUE AS OF JANUARY 1 OF THE	CURRENT YEAR	
☐ SUPPLEMENTAL ASSESSMENT *DATE OF NOTICE: ROLL YEAR:		
☐ ROLL CHANGE ☐ ESCAPE ASSESSMENT ☐ CALAMI		SESSMENT
*DATE OF NOTICE: **ROLL YEAR:	T NEAGGEGOMENT TENAETT AG	SEGGINENT
*Must attach copy of notice or bill, where applicable **Each	roll year requires a separate application	
If you are uncertain of which item to check, please check "I. OTHER" and provided the reasons that I rely upon to support requested changes in value are as A. DECLINE IN VALUE The assessor's roll value exceeds the market value as of Januar B. CHANGE IN OWNERSHIP	follows: y 1 of the current year.	r filing this application.
1. No change in ownership occurred on the date of		
$\ \square$ 2. Base year value for the change in ownership established on t	ne date of is incorre	ct.
C. NEW CONSTRUCTION		
1. No new construction occurred on the date of		
$\ \square$ 2. Base year value for the completed new construction establish	ed on the date of is	incorrect.
☐ 3. Value of construction in progress on January 1 is incorrect.		
D. CALAMITY REASSESSMENT	piofortuno or colomity	
 ☐ Assessor's reduced value is incorrect for property damaged by r E. BUSINESS PERSONAL PROPERTY/FIXTURES. Assessor's value 	•	ds market value
1. All personal property/fixtures.	or personal property and/or fixtures exceed	as market value.
☐ 2. Only a portion of the personal property/fixtures. Attach descrip	tion of those items.	
F. PENALTY ASSESSMENT		
☐ Penalty assessment is not justified.		
G. CLASSIFICATION/ALLOCATION		
1. Classification of property is incorrect.		
2. Allocation of value of property is incorrect (e.g., between land		
 H. APPEAL AFTER AN AUDIT. Must include description of each proper 1. Amount of escape assessment is incorrect. 	erty, issues being appealed, and your opinion	on of value.
☐ 2. Assessment of other property of the assessee at the location	s incorrect	
	prrectly removed the solar exclusion. Also,	see the attached Exhibit A
✓ Explanation (attach sheet if necessary)	briedly removed the solar exclusion. Also,	See the attached Exhibit A.
7. WRITTEN FINDINGS OF FACTS (\$ per)		
✓ Are requested. Are not requested.		
8. THIS APPLICATION IS DESIGNATED AS A CLAIM FOR REFUND See	Instructions	
Yes No	nstructions.	
CERTIFICAT	ON	
I certify (or declare) under penalty of perjury under the laws of the State of C	alifornia that the foregoing and all information	hereon, including any
accompanying statements or documents, is true, correct, and complete to the		
property or the person affected (i.e., a person having a direct economic intereagent authorized by the applicant under item 2 of this application, or (3) and		
Number, who has been retained by the applicant and h		
SIGNATURE: (Use Blue Per , Original signature required on paper-filed application)	SIGNED AT (CITY, STATE)	DATE
	Rancho Santa Margarita, CA	10/15/2022
NAME (Pledse Print)		
Amy Kotschedoff FILING STATUS (IDENTIFY RELATIONSHIP TO APPLICANT NAMED IN SECTION 1)		
□ OWNER Ø AGENT □ ATTORNEY □ SPOUSE □ REGISTERED DOME	STIC PARTNER 🗆 CHILD 🗆 PARENT 🗅 P	ERSON AFFECTED

☐ CORPORATE OFFICER OR DESIGNATED EMPLOYEE

MENDOCINO COUNTY UNSECURED TAX STATEMENT



Chamise Cubbison

Auditor-Controller/Treasurer-Tax Collector 501 Low Gap Rd, Room 1060 Ukiah, CA 95482

Telephone: (707) 234-6875



LAND IMPROVEMENTS OTHER PERSONAL TOTAL FOR FISCAL YEAR JULY 1, 2022 TO JUNE 30, 2023

BILL NO. **ACCOUNT NUMBER** TAX RATE AREA 0410026900003 238889 003031 ASSESSED VALUE TAX RATE TAX AMOUNT **FULL VALUE** 813,338 813,338 813.338 813,338 HOMEOWNER'S EXEMPTION NET AFTER HOMEOWNER EXEMPT. OTHER EXEMPTIONS 10% LATE FILING PENALTY (RTC 463) NET VALUE & TAX ▶ 813,338 9.849.52

TOTAL TAX DUE

9,849.52

Master are VISA OMERICAN DISC VER

SEE REVERSE FOR CREDIT CARD OR ELECTRONIC CHECK PAYMENT INFORMATION

ASSESSED TO ▼

ON JANUARY 1, 2022

AT FULL VALUE ***********AUTO**ALL FOR AADC 840 AA 3566 1/1_P19 T12

Himididuli Himididuli

TESLA ENERGY OPERATIONS, IN C/O TAX DEPT STE 100 12832 S FRONTRUNNER BLVD DRAPER UT 84020-5491

Delinquent if not paid by 5:00 p.m. August 31, 2022, thereafter, 10% penalty will be added. An additional 1½% interest each month will be added 2 months after delinquent date (R&T §2192). DESCRIPTION: CO GENERATION/POWER CO/ALTERN LOCATION: NONE

IMPORTANT INFORMATION FROM THE COUNTY ASSESSOR - PHONE (707) 234-6815

Annually the Assessor shall assess all the taxable property in the county, state assessed claiming, owning, possessing or controlling it at 12:01 a.m. on the first day of January (R&T §2192). Ownership of the property is determined owner of record on the lien date and this determines the obligation to pay taxes. All tax attach annually on the first day of liens the fiscal year for which the tax is levied. The disposal January preceding or sale of lien not relieve the the property after the date does assessee of responsibility pertaining to this assessment.

Change in Ownership - If you no longer own this property, please contact the Assessor to ascertain what information they require for removal from the current or future tax rolls.

Valuations - Changes of assessment cannot be made by the Tax Collector. If the assessment is incorrect, you must contact the Assessor information. This tax bill is issued subject the to the right of the Assessor to further examine and investigate the taxable status person, firm, or corporation to whom this tax bill is issued.

disagree with the assessed value, the taxpayer has the right to an informal assessment review by the Assessor (R&T §2611.6). If vou the and Assessor are unable to agree on a proper assessed value, pursuant to the informal assessment review, taxpayer the has taxpaver assessment for the following an application for reduction in year with the county assessment appeals board. For appeal information and how to request an application please see the reverse.

IMPORTANT INFORMATION FROM THE COUNTY TAX COLLECTOR - PHONE (707) 234-6875

Unsecured Property Tax - Unsecured Property Tax is defined as a value based property tax that is the liability of the person or entity assessed. See reverse for more information.

Payments Accepted - Payments by mail must be postmarked later than the delinquent date. Mail payment early avoid penalties. your to For information about electronic payment options please see the reverse side of this bill.

Due Date - If the due date of August 31st or other due date, as noted on this bill, falls on Saturday, Sunday, or a legal holiday, the day and hour of delinquency is 5:00 p.m. on the following business day and not considered delinquent. For questions about payment information or due dates contact the Tax Collector.

▲ DETACH HERE ▲

2022 - 2023

MENDOCINO COUNTY
UNSECURED TAX PAYMENT STUB

0410026900003

TAX RATE AREA 003031

BILL NUMBER 238889

ASSESSED TO ▼

TESLA ENERGY OPERATIONS, INC C/O TAX DEPT STE 100 12832 S FRONTRUNNER BLVD DRAPER UT 84020 RETURN THIS STUB WITH YOUR PAYMENT

THIS BILL IS NOW DUE & PAYABLE

TOTAL TAX DUE BY 08-31-2022

9,849.52

ON 9-1-22 ADD 10% PENALTY OF \$ 984.95

Total Due After 8/31/2022 through 10/31/2022 10,834.47

** In Addition ** Beginning 11-01-22 ADD \$ 147.74 the first day of each month until paid in full.

PLEASE MAKE CHECK PAYABLE TO: MENDOCINO COUNTY TAX COLLECTOR 501 LOW GAP RD, ROOM 1060 UKIAH, CA 95482

EXHIBIT A

Application for Changed Assessment

This Exhibit A is hereby made a part of this filing and applies to all sections thereof. This filing also includes all property at this location, all property which is part of the economic unit, and all other assessments, notices, and/or penalties relating to the Taxpayer herein during the regular assessment period and/or within sixty days prior to this filing. Taxpayer's opinion of total value is the total value of all property and any allocation of this value or any allocation of values between parcels within an economic unit are for administrative convenience only.

The assessment was not made in accordance with provisions of federal and state constitutional, statutory, administrative and case law, including but not limited to Articles XIII, XIII A, XIII B, XIII C, and XIII D of the California Constitution and its implementing statutes and regulations. Assessments were not made within the appropriate statutes of limitation. Some of the statutory provisions and administrative rules applied with respect to this assessment are unconstitutional, under the federal and state constitutions. Further, some of the state constitutional provisions are unconstitutional under the federal constitution.

The assessment does not reflect the correct base year, base-year value, trended base-year value, or full cash value of the property. The assessment does not reflect either the lower of a proper base-year value (including the trend factor) or fair market value (taking into account all factors, including misfortunes or calamities). There was no event allowing upward revaluation under Article XIII A since the appropriate base year. The assessment was based on mistaken facts, including but not limited to the date of valuation and the status of completion of the property.

The assessment was based upon an invalid method of valuation. The assessment is not justified by any method of valuation. To the extent that a valid method of valuation was used, the assessment was based upon an invalid application of that method. The assessment was improperly calculated as to all elements of value under each method of valuation.

Legal and factual mistakes were made as to the inclusion of double-taxed property and non-taxable property; the inclusion of property not owned and/or possessed by taxpayer; property assumed to be existing which was not existing; classification of property; the effect of enforceable restrictions; exemption of property. Further, all or part of the property is immune from taxation as government owned property.

Each of the grounds for protesting the taxes herein are separate. No ground, claim of exemption or immunity, or any protest herein is to be deemed as a waiver of any other ground for protesting the taxes herein. Supplementary or clarifying information will be supplied at the request of the taxing authority. Applicant reserves the right to supplement, clarify or delete the above grounds.

Authorization for Property Tax Matters

Versatax Consulting, Inc. is authorized to represent Tesla Energy Operations, Inc. and related entities for all property tax matters in the counties on the attached list. Versatax Consulting, Inc. is delegated full authority to handle all matters (including open prior-year appeals) relative to property taxes and assessments related to the property owned, possessed, or controlled by the undersigned and to represent us, with the assistance of legal counsel, if necessary, in the appeal process.

Versatax Consulting, Inc. will provide Tesla Energy Operations, Inc. and related entities copies of all appeal applications that are filed on their behalf.

This agency shall be in effect for the 2021, 2022, and 2023 calendar years or until revoked in writing by either party. Versatax Consulting, Inc. is authorized to sign and file applications in the specific calendar year in which the applications is filed.

All correspondence shall continue to be directed to Tesla Energy Operations, Inc. at the address on file. The contact information for Versatax Consulting is as follows:

NAME:	P	eter W. K	otschedoff
	V	ersatax C	Consulting, Inc.
ADDRESS:	2	3052 Alic	ia Parkway, H-372
	M	lission Vi	ejo, CA 92692
	94	49-235-8	209
SIGNED:		X	
	O., D:		T
NAME/TITLE: Sr. Director, U.S. Tax			
			(Owner/Officer/Partner)
DATE EFFEC	TIVE: _	2.26	5.21

Tesla Energy Operations, Inc. Authorization County list 2021-2023

Alameda	Orange
Alpine	Placeŗ
Amador	Plumas
Butte	Riverside
Calaveras	Sacramento
Colusa	San Benito
Contra Costa	San Bernardino
Del Norte	San Diego
El Dorado	San Francisco
Fresno	San Joaquin
Glenn	San Luis Obispo
Humboldt	San Mateo
Imperial	Santa Barbara
Inyo	Santa Clara
Kern	Santa Cruz
Kings	Shasta
Lake	Sierra
Lassen	Siskiyou
Los Angeles	Solano
Madera	Sonoma
Marin	Stanislaus
Mariposa	Sutter
Mendocino	Tehama
Merced	Trinity
Modoc	Tulare
Mono	Tuolumne
Monterey	Ventura
Napa	Yolo
Nevada	Yuba



ASSESSMENT APPEALS BOARD MENDOCINO COUNTY

501 Low Gap Road, Room 1010 Ukiah, CA 95482 Telephone: (707) 463-4441 FAX: (707) 463-7237

ASSESSMENT APPEAL HEARING DATE CONFIRMATION NOTICE

Hearing Date/Time: 10/30/2023 1:30pm Location: COUNTY ADMINISTRATION CENTER

Please Return This Notice in the Envelope Provided to the Clerk of the Board By October 5, 2023



ASSESSMENT APPEALS BOARD MENDOCINO COUNTY

501 Low Gap Road, Room 1010 Ukiah, CA 95482 Telephone: (707) 463-4441

FAX: (707) 463-7237

ASSESSMENT APPEAL APPLICATION POSTPONEMENT

Pursuant to Section Rule 323, subsection (a) of the Revenue and Taxation Code, taxpayers may request a postponement of an application from a hearing appeal date. The applicant and/or the assessor shall be allowed one postponement as a matter of right, the request for which must be made no later than 21 days before the hearing is scheduled to commence. If the applicant requests a postponement of a scheduled hearing within 120 days of the expiration of the two-year limitation period provided in section 1604, the postponement will be contingent upon the applicant agreeing to extend and toll indefinitely the two-year period. The applicant has the right to terminate the extension agreement with 120 days written notice.

The assessor is not entitled to a postponement as a matter of right within 120 days of the expiration of the two-year limitation period. However, at the discretion of the Board, such a request may be granted. In addition, if the applicant or the applicant's agent is unable to attend a properly noticed hearing, the applicant or the applicant's agent may request, prior to the hearing date, a postponement of the hearing with a showing of good cause to the Board. Any information exchange dates established pursuant to Rule 305.1 remain in effect based on the originally scheduled hearing date, notwithstanding the hearing postponement, except when a hearing is postponed due to the failure of a party to respond to an exchange of information.

Should you wish to request a postponement for an Assessment Appeal hearing, please notify the Executive Office promptly by completing and returning this form to:

MENDOCINO COUNTY EXECUTIVE OFFICE 501 Low Gap Road, Room 1010 Ukiah, CA 95482

Attn: Atlas M.A. Pearson, Senior Deputy Clerk of the Assessment Appeals Board

I hereby request a continuance of the following application for changed assessment:

Applicant:

Tesla Energy Operations Inc

Address:

12832 S. Frontrunner Blvd #100

Draper, UT 84020

APN/Account #:

Tax Year Protested:

Appeal Roll Type:

Regular

Application/Case #:

22-0001

Date: 10-2-23

Applicant's Signature (Original Required)



COUNTY OF MENDOCINOAssessment Appeals Board

DARCIE ANTLE CHIEF EXECUTIVE OFFICER CLERK OF THE BOARD

501 Low Gap Rd. Room 1010 Ukiah, CA 95482

Email: cobsupport@mendocinocounty.org Website: www.mendocinocounty.org

Office: (707) 463-4441 Fax: (707) 463-5649

EXTENSION OF TIME REQUEST

Pursuant to Section 1604(c) of the Revenue and Taxation Code,	by mutual consent, the undersigned agree the
hearing of the Assessment Appeals Board on protest application ne	umber(s) for the
reduction in assessment for the regular assessmen	t year, may be extended beyond the two-year
statute of limitations of the timely filing of said applications.	
This extension of time is executed on theday of the month	of DANAC . 2023, at
Author	
Gry Utting	Date: 10 7 23
Applicant/Authorized Agent (Original Signature Required)	
La La La Company de la Company	11-1
Moral Switch Comme	Date: 10 18 2023
Katrina Bartolomie, Assessor	
	Date:
Christian M. Curtis, County Counsel	
	Date:
MaryEllen Sheppard, Chair, Assessment Appeals Board	
BY:	Date:
Attest: DARCIE ANTLE, Clerk of the Board	

MENDOCINO COUNTY EXECUTIVE OFFICE

501 Low Gap Road, Room 1010 Ukiah, CA. 95482

Attn: Atlas Pearson, Senior Deputy Clerk of the Board



DARCIE ANTLE
Chief Executive Officer/
Clerk of the Board

CHRISTIAN M. CURTIS
County Counsel

COUNTY ADMINISTRATION CENTER
501 Low Gap Road, Room 1070
Ukiah, CA 95482
(707) 463-4441 (t)
(707) 463-5649 (f)
cob@mendocinocounty.org

MENDOCINO COUNTY ASSESSMENT APPEALS BOARD ACTION MINUTES – July 17, 2023

BEFORE THE ASSESSMNET APPEALS BOARD
COUNTY OF MENDOCINO - STATE OF CALIFORNIA
FAIR STATEMENT OF PROCEEDINGS
(PURSUANT TO CALIFORNIA GOVERNMENT CODE §25150)

AGENDA ITEM NO. 1 - OPEN SESSION (9:17 A.M.)

1a) ROLL CALL

Present: Member Richard Selzer, and Member Leland Kraemer.

Staff Present: Charlotte Scott, Assistant County Counsel; Atlas M. Pearson, Senior Deputy Clerk of the Board/Clerk of the Board of Equalization; Lillian Bearden, Deputy Clerk of the Board/Clerk of the Board of Equalization; and Katrina Bartolomie, Assessor/Clerk-Recorder.

1B) CONFIRM PROPER NOTICE OF PUBLIC HEARING

Presenter: Lillian Bearden, Deputy Clerk of the Board/ Clerk of the Board of Equalization, announced that proper notice had been established.

1c) ELECTION OF CHAIR AND VICE-CHAIR

Presenter: Lillian Bearden, Deputy Clerk of the Board/ Clerk of the Board of Equalization.

Public Comment: None.

Board Action: Upon motion by Member Kraemer, seconded by Member Selzer, IT IS ORDERED that the Assessment Appeals Board nominates and elects member Maryellen Shepherd as Chair and Member Richard Selzer as Vice-Chair of the Mendocino County Assessment Appeals Board for the 2023-2024 calendar. The motion carried by the following vote:

Aye: 2 - Member Selzer, and Member Kraemer

No: 0 - None

Absent: 1 – Member Shepherd

1D) ADOPTION OF 2023-24 BOARD OF EQUALIZATION LOCAL PROPERTY TAX RULES

Presenter: Vice-Chair Selzer.

Public Comment: None.

Board Action: Upon motion by Member Kraemer, seconded by Member Selzer, IT IS ORDERED that the Assessment Appeals Board adopts the 2023-24 Board of Equalization Local Property Tax rules.

The motion carried by the following vote:

Aye: 2 - Member Selzer, and Member Kraemer

No: 0 - None

Absent: 1 – Member Shepherd

1E) ADOPTION OF 2023-24 MASTER MEETING SCHEDULE

Presenter: Vice-Chair Selzer.

Public Comment: None.

Board Action: Upon motion by Member Kraemer, seconded by Member Selzer, IT IS ORDERED that the Assessment Appeals Board adopts the 2023-24 Master Meeting Schedule.

The motion carried by the following vote:

Aye: 2 – Member Selzer, and Member Kraemer

No: 0 - None

Absent: 1 – Member Shepherd

1F) CONFIRM AGENDA AMENDMENTS

Presenter: Lillian Bearden, Deputy Clerk of the Board/ Clerk of the Board of Equalization, announced that there were no updates subsequent to agenda publication.

1G) ANNOUNCE ORDER OF PROCEEDINGS

AGENDA ITEM NO. 2 - OTHER BUSINESS

2A) - APPROVAL OF MINUTES OF THE APRIL 24, 2023 MEETING

Presenter: Member Selzer; Vice-Chair.

Public Comment: None.

Board Action: Upon motion by Member Kraemer, seconded by Member Selzer, IT IS ORDERED that the Assessment Appeals Board approves the minutes of the April 24, 2023 meeting.

The motion carried by the following vote:

Aye: 2 – Member Selzer, and Member Kraemer

No: 0 - None

Absent: 1 - Member Shepherd

2B) PUBLIC EXPRESSION

None.

2C) MATTERS FROM STAFF

Presenter/s: Atlas M. Pearson, Senior Deputy Clerk of the Board/Clerk of the Board of Equalization.

2D) ANNOUNCEMENTS

None.

2E) CONFIRM DATE OF NEXT MEETING - OCTOBER 23, 2023

Presenter: Lillian Bearden, Deputy Clerk of the Board/ Clerk of the Board of Equalization, confirmed that the next meeting date is October 23, 2023.

2F) ADJOURNMENT

THERE BEING NOTHING FURTHER TO COME BEFORE THE BOARD, THE MENDOCINO COUNTY ASSESSMENT APPEALS BOARD ADJOURNED AT 9:28 A.M.

Attest: ATLAS PEARSON

Senior Deputy Clerk of the Board/ Deputy

Clerk of the Board of Equalization

MarvEllen Sheppard, Chair	 	