

EL DORADO COUNTY ASSESSOR
360 Fair Ln., Placerville, CA. 95667

***Application for Reassessment of Damaged or Destroyed Assessable Property
in excess of \$10,000 (R&T Sec. 170)***

(Application must be made within 12 months of the misfortune or calamity, or specific calamity ordinance, whichever is later.)

Filing Date: _____ Contact Phone Number _____

Owners Name _____ Assessor's Parcel Number _____

Mailing Address

Property Address or Location: _____

Date of Misfortune or Calamity: _____

Type of Misfortune or Calamity: _____

Property Destroyed or Damaged consisted of:

Applicant Opinion of Value	Value Before Damage	Value After Damage	Amount of Damage*
Land	_____	_____	_____
Improvement (Structure)	_____	_____	_____

(Does not include nonassessable items such as personal effects, household furnishings, or Business inventory.)

* Attach Documentation, such as insurance adjustment estimate or statement from licensed contractor.

Do you plan to replace or repair damage. Yes No

I hereby apply for reassessment of the property described above.

I declare that I was the owner of the property, or had it in my possession and control at the time of loss, and that I am responsible for the taxes. I certify (or declare) under penalty of perjury under the laws of the State of California, that the forgoing and all information hereon, including any accompanying statements, or documents is true, correct and complete to the best of my knowledge and belief.

Signed: _____ Date: _____