Clerk of the Assessment Appeals Board
Assessment Appeals Division
P. O. Box 22023
Santa Ana, CA 92702-0687
(714) 834-2331 ** FAX (714) 834-4185

Susan Novak
Clerk of the Board

Pat Martinez
Assessment Appeals Division Manager

Confirmation of Appearance

To: The Orange County Clerk of the Assessment Appeals Board

From: _____
(Please print.)

Re: Application Number(s):

_____

_____

Parcel/Assessment Number(s):

_____

_____

☐ Additional affected applications numbers are listed on attachment.
Number of pages attached: _____

I hereby confirm my appearance at the following Assessment Appeals Board hearing for the above-referenced Application(s) for Changed Assessment.

Date: _____
Month **Day** **Year**

At: Old County Courthouse
211 W. Santa Ana Blvd., Hearing Room _____
Santa Ana, CA 92701

_____ _____
Applicant's/Agent's Signature Date

_____ _____
Print Name Title

Instructions

Complete the form. The form must be completed by the property owner, his/her authorized agent/attorney, an authorized employee, partner or corporate officer.

Insert the application number(s) and related parcel/assessment number(s) that are scheduled at the Assessment Appeals Board hearing.

If necessary, please check the box to indicate more application numbers are listed on an additional attachment(s) and submit it(them) with the form.

Sign and date the form.

Print the name and title of the person signing the form.

Keep a copy for your records.

Fax completed form to (714) 834-4185.

Or, mail completed form to:

Clerk of the Assessment Appeals Board

P.O. Box 22023

Santa Ana, CA 92702-2023

Or submit it in person at:

Clerk of the Assessment Appeals Board

333 West Santa Ana Blvd., Ste. 101

Santa Ana, CA 92701