

County of Santa Clara

Office of the Clerk of the Board of Supervisors
Assessment Appeals Board
County Government Center, 10th Floor East Wing
70 West Hedding Street
San Jose, California 95110-1770
(408) 299-5088 • FAX (408) 298-8460 • TDD (408) 993-8272
assessmentappeals@cob.sccgov.org • www.sccgov.org/assessmentappeals



ASSESSMENT APPEALS HEARING WAIVER

Application No(s): _____ APN/Acct No(s): _____

Owner Name: _____

Property Location: _____

City/State/Zip: _____

I consent and agree to a waiver of the two (2) year limit contained in Section 1604 (c). The date of the hearing may be continued beyond the limit of two (2) years after the date of filing (Section 1604(c) of the Revenue and Taxation Code, and Section 309 of the Property Tax Rules). This agreement to an extension of time for hearing beyond the two year period is effective by delivery of this form to the County of Santa Clara, physically or by way of facsimile transmission, after signature by the taxpayer or its representative.

(Signed)

Date

Print Name

Contact Phone

Current Mailing Address

Email Address

Mail Form to: Clerk of the Assessment Appeals Board
County Government Center, East Wing, 10th Floor
70 West Hedding Street
San Jose, CA 95110

Or, Fax form to:
(408) 298-8460
Or, Email form to:
assessmentappeals@cob.sccgov.org