



Clerk of the Assessment Appeals Board

2800 W. Burrel Avenue

Visalia, CA 93291

(559) 636-5000 ** FAX (559) 615-3009

Jason T. Britt
County Administrative Officer/
Clerk of the Board

Melinda Benton
Chief Clerk

**POSTPONEMENT/RESCHEDULING
FIRST REQUEST LESS THAN 21 DAYS BEFORE HEARING**

Hearing Date: _____ Application No(s): _____ Applicant's Name: _____ Agent's/Attorney's Name: _____ Requesting Party: _____	Clerk Use Only: Postponed to: _____ _____ <i>Clerk of the Assessment Appeals Board</i> _____ <i>Date</i>
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SECTION 1: REQUEST

I hereby request a first postponement of the hearing set for the above application on the above date. I acknowledge that I have missed the deadline to request a postponement as a matter of right. I understand that the Clerk may grant the postponement request contingent upon the other party not objecting by completing Section 2 below, and the applicant signing the 1604(c) Waiver Agreement, Section 3 below, waiving the two year limitation period set forth in section 1604 of the Revenue and Taxation Code, which requires the Assessment Appeals Board to make a decision on the application within two years of the filing of the application. I also understand that if there is more than one applicant, each applicant must sign this request, or the request will not be granted.

Any information exchange dates remain in effect based on the originally scheduled hearing date notwithstanding the hearing postponement, except as provided in regulation 305.1(d) Non-response to Request for Information.

_____	_____	_____
<i>Signature - Requesting Party</i>	<i>Title</i>	<i>Date</i>

SECTION 2: OTHER PARTY

I do not object to the postponement request. I object to the postponement request.

_____	_____	_____
<i>Signature - Other Party</i>	<i>Title</i>	<i>Date</i>

SECTION 3: APPLICANT 1604 (C) WAIVER AGREEMENT

I request an extension of the time period set forth in Revenue and Taxation Code Section 1604 subdivision (c), which requires the Assessment Appeals Board to make a decision on the application within two years of the filing of the application, and recognize that by making this request I waive this right under Revenue and Taxation Code Section 1604 subdivision (c). I understand that each applicant must sign this request, or the request will not be granted.

_____	_____	_____
<i>Signature of Applicant/Agent/Attorney</i>	<i>Title</i>	<i>Date</i>