Clerk of the Assessment Appeals Board
2800 W. Burrel Avenue
Visalia, CA 93291
(559) 636-5000 ** FAX (559) 733-6898

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:_____

_____
Clerk of the Assessment Appeals Board

_____
Date

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.

_____, _____ _____
Signature - Requesting Party *Title* *Date*

SECTION 2: OTHER PARTY

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

_____, _____ _____
Signature - Other Party *Title* *Date*

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.

_____ _____ _____
Signature of Applicant/Agent/Attorney *Title* *Date*