Agenda

Siskiyou County Assessment Appeals Board
Siskiyou County Meeting Chambers
Siskiyou County Government Center, Second Floor
311 Fourth Street Yreka, CA 96097 April 25, 2025 9:00a.m.

1. Stipulation agreements

	Appeal/Application No.	Applicant	Property Identification
A.	21-05	Tesla Energy Operations Inc	800-006-499-000
B.	22-08	Tesla Energy Operations Inc	800-006-499-000
C.	23-04	Tesla Energy Operations Inc	800-006-499-000
2.	Adjournment		



Craig S. Kay, Assessor–Recorder County of Siskiyou

311 Fourth Street • Room 108 • Yreka, CA 96097-2984 Assessor (530) 842-8036 • Recorder (530) 842-8065 • Fax (530) 842-8059

April 25, 2025

Siskiyou County Assessment Appeals Board 311 Fourth Street PO Box 338 Yreka, CA 96097

Re: Applications for Changed Assessment for the **2020-21** Assessment, Application **#21-05**; **2021-22** Assessment, Application **#22-08**; **2022-23** Assessment, Application **#23-04**; these Applications are for Solar Fixtures assessed on the Unsecured Roll, Assessment No. **800-006-499-000** for Tesla Energy Operations Inc.

Dear Board Members:

The assessment, which is the subject of these appeals, are solar fixture assessments. The Owner is Tesla Energy Operations Inc. The California Assessors' Association approved the factor tables for lien dates 2016 through 2024 for the valuation issues with respect to these Appeals for assessment years 2021-2023.

As a result of the above facts, the Assessor recommends the following changes under the provisions of California Revenue and Taxation Code 1610.8.

Assessment No. 800-006-499-000

<u>Year</u>	<u>From:</u>	<u>To:</u>
:	Fixtures	Fixtures
2020/2021	\$1,077,970	\$769,976
2021/2022	\$1,062,570	\$723,777
2022/2023	\$1,077,970	\$708,377

The Applicant stipulates to the revised values and requests to waive their appearance at the hearing of the Applications pursuant to California Revenue and Taxation Code Section 1607(a).

Craig S Kay, Assessor-Recorder

M. Cold

Sala Energy Operations Inc.

Amy Kotschedoff, Versatax Consulting

Natalie Reed

Board

Siskiyou County Counsel

Chair, Assessment Appeals

BOE-305-AH (P1) REV. 09 (05-20)

ASSESSMENT APPEAL APPLICATION

This form contains all of the requests for information that are required for filing an application for changed assessment. Failure to complete this application may result in rejection of the application and/or denial of the Siskiyou County Assessment Appeals Board 311 Fourth Street, Room 201 Yreka CA 96097 RECEIVED

FILED

appeal. Applicants should be prepared to su					N	OV 2 9 2021		
information if requested by the assessor of the hearing. Failure to provide information	rina			SISKIYOU COUNTY				
the appeals board considers necessary m	the NUV	30	2021	CLERK'S OFFICE				
continuance of the hearing or denial of the attach hearing evidence to this applicat	not I ALIRA R	YNIJA	A_CLERK_	APPLICATION NUMBER: Clerk Use Only				
1. APPLICANT INFORMATION - PLEASE		BY: Deuc		~ ~ ~	21-0			
NAME OF APPLICANT (LAST, FIRST, MIDDLE INITIAL), B			Ü	Deputy Clerk	EMAIL ADDRESS			
Tesla Energy Operations Inc								
MAILING ADDRESS OF APPLICANT (STREET ADDRESS 12832 S Frontrunner Blvd #100	URP, O. BUX)							
CITY Draper	STATE UT	1	DAY	TIME TELEPHONE	ALTERNATE TELEPH	ONE FAX T	ELEPHONE	
2. CONTACT INFORMATION - AGENT, A		OR RELATIVE	OF AF	PPLICANT if and	nlicable - /REPRES	ENTATION	POPTIONAL)	
NAME OF AGENT, ATTORNEY, OR RELATIVE (LAST, FIR			<u> </u>	т цодит п ар	EMAILADDRESS	, LNIA ION I	O TIONAL!	
Kotschedoff, Amy					amy.kotschedoff@	versataxconsu	lting.com	
COMPANY NAME Versatax Consulting Inc								
CONTACT PERSON IF OTHER THAN ABOVE (LAST, FIRS	ST, MIDDLE INT	TTAL)			-			
MAILING ADDRESS (STREET ADDRESS OR P. O. BOX)								
23052 Alicia Parkway #H-372								
CITY Mission Viejo	STATE CA	ZIP CODE 92692		TIME TELEPHONE 310)650-1921	ALTERNATE TELEPH	ONE FAX T	ELEPHONE	
AUTHORIZATION OF AGENT	(TION ATTACHE	\` D			
The following information must be comp		ttached to this	applic	ation - see instr	ructions) unless th			
attorney as indicated in the Certification								
applicant is a business entity, the agent The person named in Section 2 above is								
					lpplication, and ma lating to this appli		sessor s records,	
SIGNATURE OF APPLICANT, OFFICER, OR AUTHORIZED				TITLE			DATE	
				<u> </u>				
3. PROPERTY IDENTIFICATION INFORM	NATION							
☐ Yes ✓ No Is this property a singl	le-family dwe	elling that is occupi	ied as t	he principal place o	of residence by the ow	ner?		
ENTER APPLICABLE NUMBER FROM Y	OUR NOT	ICE/TAX BILL			·			
ASSESSOR'S PARCEL NUMBER		ESSMENT NUMBE	:p		FEE NUMBER	_ .		
AGGEGGONG PANGLE NOWIDEN		00-006-499-00			FEE NOWBER			
ACCOUNT NUMBER		TAX BILL NUMBER			L			
DEODEDT/ADDDDGG OD LOCATION					DONO DUONICOO	0 (004) 15		
PROPERTY ADDRESS OR LOCATION Fquip locations: Various					DOING BUSINESS AS (DBA), if appropriate			
PROPERTY TYPE								
SINGLE-FAMILY / CONDOMINIUM / TO	WNHOUSE	/ DUPLEX		GRICULTURAL	П	POSSESSOR	Y INTEREST	
☐ MULTI-FAMILY/APARTMENTS: NO. OF		_	MANUFACTURED		VACANT LAN			
☐ COMMERCIAL/INDUSTRIAL	J			ATER CRAFT		AIRCRAFT	D	
✓ BUSINESS PERSONAL PROPERTY/FIX			THER:	i.	MINORALI			
	-			,		0.45554	0.0010010000111	
4. VALUE	Α.`	VALUE ON ROLL		B. APPLICANT'S	OPINION OF VALUE	C. APPEA	LS BOARD USE ONLY	
LAND								
IMPROVEMENTS/STRUCTURES				100 000				
FIXTURES	1,077,97	0		107,797				
PERSONAL PROPERTY (see instructions)				•				
MINERAL RIGHTS								
TREES & VINES								
OTHER							<u> </u>	
TOTAL	1,077,97	0		107,797				
PENALTIES (amount or percent)	1			1		1		

BOE-305-AH (P2) REV. 09 (05-20)

5. TY	PE OF ASSESSMENT BEING APPEALED 🇹 Check only one. See instructions for filing periods
	REGULAR ASSESSMENT - VALUE AS OF JANUARY 1 OF THE CURRENT YEAR
	*DATE OF NOTICE: ROLL YEAR:
П	
_	*DATE OF NOTICE: **ROLL YEAR:
	*DATE OF NOTICE: **ROLL YEAR:* *Must attach copy of notice or bill, where applicable **Each roll year requires a separate application
lf ye	ASON FOR FILING APPEAL (FACTS) See instructions before completing this section. ou are uncertain of which item to check, please check "I. OTHER" and provide a brief explanation of your reasons for filing this application. e reasons that I rely upon to support requested changes in value are as follows:
	DECLINE IN VALUE
В.	☐ The assessor's roll value exceeds the market value as of January 1 of the current year. CHANGE IN OWNERSHIP
	1. No change in ownership occurred on the date of
	2. Base year value for the change in ownership established on the date of is incorrect.
-	NEW CONSTRUCTION
	1. No new construction occurred on the date of
	2. Base year value for the completed new construction established on the date of is incorrect.
	☐ 3. Value of construction in progress on January 1 is incorrect. CALAMITY REASSESSMENT
	□ Assessor's reduced value is incorrect for property damaged by misfortune or calamity.
	BUSINESS PERSONAL PROPERTY/FIXTURES. Assessor's value of personal property and/or fixtures exceeds market value.
1	☑ 1. All personal property/fixtures.
!	2. Only a portion of the personal property/fixtures. Attach description of those items.
	PENALTY ASSESSMENT
	☐ Penalty assessment is not justified.
	CLASSIFICATION/ALLOCATION 1. Classification of property is incorrect.
	☐ 1. Glassification of property is incorrect (e.g., between land and improvements).
Н. А	APPEAL AFTER AN AUDIT. Must include description of each property, issues being appealed, and your opinion of value.
	1. Amount of escape assessment is incorrect.
	☐ 2. Assessment of other property of the assessee at the location is incorrect.
	This assessment may have incorrectly removed the solar exclusion. Also, see attached Exhibit and Explanation (attach sheet if necessary)
	Are requested. Are not requested.
8. THI	S APPLICATION IS DESIGNATED AS A CLAIM FOR REFUND See instructions.
abla	Yes ☐ No
	CERTIFICATION
Logdi	fy (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any
accon prope	npanying statements or documents, is true, correct, and complete to the best of my knowledge and belief and that I am (1) the owner of the rty or the person affected (i.e., a person having a direct economic interest in the payment of taxes on that property – "The Applicant"), (2) an authorized by the applicant under item 2 of this application, or (3) an attorney licensed to practice law in the State of California, State Bar
SIGNAT	URE (Use Blue Fen - Briginal signature required on paper-filed application) SIGNED AT (CITY, STATE)
NALIT L	CAMP WYLL
NAME (I	Reade Hipti
FILING	STATUS (IDENTIFY RELATIONSHIP TO APPLICANT NAMED IN SECTION 1)
\checkmark	OWNER AGENT ATTORNEY SPOUSE REGISTERED DOMESTIC PARTNER CHILD PARENT PERSON AFFECTED
	CORPORATE OFFICER OR DESIGNATED EMPLOYEE

BOE-305-AH (P1) REV, 09 (05-20)

ASSESSMENT APPEAL APPLICATION

This form contains all of the requests for information that are required for filing an application for changed assessment. Failure to complete this application may result in rejection of the application and/or denial of the Siskiyou County Assessment Appeals Board 311 Fourth Street, Room 201 FILED Yreka CA 96097 Siskiyou County

DEC 01 2022

appeal. Applicants should be prepared to submit additional information if requested by the assessor or at the time of LAURA BYNUM, CLERK the hearing. Failure to provide information at the hearing BY: (Leudly 1 fer the appeals board considers necessary may result in the Deputy Clerk continuance of the hearing or denial of the appeal. Do not APPLICATION NUMBER: Clerk Use Only attach hearing evidence to this application. 1. APPLICANT INFORMATION - PLEASE PRINT EMAIL ADDRESS NAME OF APPLICANT (LAST, FIRST, MIDDLE INITIAL), BUSINESS, OR TRUST NAME Tesla Energy Operations Inc. amy.kotschedoff@versataxconsulting.com MAILING ADDRESS OF APPLICANT (STREET ADDRESS OR P. O. BOX) 12832 S. Frontrunner Blvd #100 DAYTIME TELEPHONE ALTERNATE TELEPHONE FAX TELEPHONE 84020 Draper 2. CONTACT INFORMATION - AGENT, ATTORNEY, OR RELATIVE OF APPLICANT if applicable - (REPRESENTATION IS OPTIONAL) NAME OF AGENT, ATTORNEY, OR RELATIVE (LAST, FIRST, MIDDLE INITIAL) EMAIL ADDRESS Kotschedoff, Amy amy.kotschedoff@versataxconsulting.com COMPANY NAME Versatax Consulting CONTACT PERSON IF OTHER THAN ABOVE (LAST, FIRST, MIDDLE INTITAL) MAILING ADDRESS (STREET ADDRESS OR P. O. BOX) 23052 Alicia Parkway #H-372 STATE DAYTIME TELEPHONE ALTERNATE TELEPHONE FAX TELEPHONE ZIP CODE 92692 (866)390-1076 CA (310) 650-1921 <u>Mission Vieio</u> **AUTHORIZATION OF AGENT ☑** AUTHORIZATION ATTACHED The following information must be completed (or attached to this application - see instructions) unless the agent is a licensed California attorney as indicated in the Certification section, or a spouse, child, parent, registered domestic partner, or the person affected. If the applicant is a business entity, the agent's authorization must be signed by an officer or authorized employee of the business. The person named in Section 2 above is hereby authorized to act as my agent in this application, and may inspect assessor's records, enter in stipulation agreements, and otherwise settle issues relating to this application. SIGNATURE OF APPLICANT, OFFICER, OR AUTHORIZED EMPLOYEE DATE TITLE 3. PROPERTY IDENTIFICATION INFORMATION Yes V No Is this property a single-family dwelling that is occupied as the principal place of residence by the owner? ENTER APPLICABLE NUMBER FROM YOUR NOTICE/TAX BILL ASSESSMENT NUMBER ASSESSOR'S PARCEL NUMBER FEE NUMBER 800-006-499-000 555-006-000-000 ACCOUNT NUMBER TAX BILL NUMBER PROPERTY ADDRESS OR LOCATION DOING BUSINESS AS (DBA), if appropriate EQUIP LOC: VARIOUS PROPERTY TYPE

✓ SINGLE-FAMILY / CONDOMINIUM / TOWNHOUSE / DUPLEX AGRICULTURAL POSSESSORY INTEREST MULTI-FAMILY/APARTMENTS: NO. OF UNITS ☐ MANUFACTURED HOME ☐ VACANT LAND WATER CRAFT ☐ COMMERCIAL/INDUSTRIAL ☐ AIRCRAFT ✓ BUSINESS PERSONAL PROPERTY/FIXTURES OTHER: C, APPEALS BOARD USE ONLY 4. VALUE A. VALUE ON ROLL B, APPLICANT'S OPINION OF VALUE LAND IMPROVEMENTS/STRUCTURES 1,062,570 530,000 **FIXTURES** PERSONAL PROPERTY (see instructions) MINERAL RIGHTS TREES & VINES OTHER 530,000 TOTAL 1,062,570 PENALTIES (amount or percent)

BOE-305-AH (P2) REV. 09 (05-20)

5. TY	OF ASSESSMENT BEING APPEALED 🇹 Check only one. See instructions for filing periods	
V	REGULAR ASSESSMENT – VALUE AS OF JANUARY 1 OF THE CURRENT YEAR	
	SUPPLEMENTALASSESSMENT	
	DATE OF NOTICE: ROLL YEAR:	
	ROLL CHANGE ☐ ESCAPE ASSESSMENT ☐ CALAMITY REASSESSMENT ☐ PENALTY ASSESSMENT	
	DATE OF NOTICE: **ROLL YEAR: Must attach copy of notice or bill, where applicable **Each roll year requires a separate application	
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	SON FOR FILING APPEAL (FACTS) See instructions before completing this section.	
	are uncertain of which item to check, please check "I. OTHER" and provide a brief explanation of your reasons for filing this applicate easons that I rely upon to support requested changes in value are as follows:	ion.
	ECLINE IN VALUE	
	The assessor's roll value exceeds the market value as of January 1 of the current year.	
В.	HANGE IN OWNERSHIP	
	1. No change in ownership occurred on the date of	
	2. Base year value for the change in ownership established on the date of is incorrect.	
C.	EW CONSTRUCTION	
	1. No new construction occurred on the date of	
	2. Base year value for the completed new construction established on the date of is incorrect.	
	3. Value of construction in progress on January 1 is incorrect.	
	ALAMITY REASSESSMENT	
	Assessor's reduced value is incorrect for property damaged by misfortune or calamity.	
	JSINESS PERSONAL PROPERTY/FIXTURES. Assessor's value of personal property and/or fixtures exceeds market value. 1. All personal property/fixtures.	
	Only a portion of the personal property/fixtures. Attach description of those items.	
	ENALTY ASSESSMENT	
	Penalty assessment is not justified.	
	ASSIFICATION/ALLOCATION	
	1. Classification of property is incorrect.	
	2. Allocation of value of property is incorrect (e.g., between land and improvements).	
	PPEAL AFTER AN AUDIT. Must include description of each property, issues being appealed, and your opinion of value. 1. Amount of escape assessment is incorrect.	
	Assessment of other property of the assessee at the location is incorrect.	
	The assessment may have incorrectly removed the solar exclusion. Also, see the attached Exhibit A.	
	Explanation (attach sheet if necessary)	_
7. WF	TEN FINDINGS OF FACTS (\$20.00 per parcel)	
\mathbf{V}	re requested. Are not requested.	
8. TH	APPLICATION IS DESIGNATED AS A CLAIM FOR REFUND See instructions. Ses [] No	
	CERTIFICATION	
accor prope	(or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including anying statements or documents, is true, correct, and complete to the best of my knowledge and belief and that I am (1) the owner of or the person affected (i.e., a person having a direct economic interest in the payment of taxes on that property – "The Applicant"), (2 athorized by the applicant under item 2 of this application, or (3) an attorney licensed to practice law in the State of California, State	the) an
SIGNA	DATE DATE D	—
<u> </u>	Rancho Santa Margarita, CA 10/18/22	
_	ase Print)	_
	KOTSCHEGOTT	—
FILING ✓		****
¥	OWNER 📝 AGENT 📋 ATTORNEY 📋 SPOUSE 📋 REGISTERED DOMESTIC PARTNER 📋 CHILD 📋 PARENT 📋 PERSON AFFEC	IED
	CORPORATE OFFICER OR DESIGNATED EMPLOYEE	

BOE-305-AH (P1) REV. 11 (05-22)

ASSESSMENT APPEAL APPLICATION

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Siskiyou County Assessment Appeals Board 311 Fourth Street, Room 201 Yreka, CA 96097 F I L E D

Siskiyou County
DEC 01 2023

attach hearing evidence to this applicat		LAUKA	BXI	INW Cress	APPLICATIO		BER: Clerk Use Only	
1. APPLICANT INFORMATION - PLEASE	PRINT	BY:	us	7100-7	- })-OH	
NAME OF APPLICANT (LAST, FIRST, MIDDLE INITIAL), BU	USINESS, OR T	RUST NAME		- U-Deputy	EMMIT ADDRESS		-	
Tesla Energy Operations Inc MAILING ADDRESS OF APPLICANT (STREET ADDRESS	ORPO BOY				amy.kotsched	oπ@ver	sataxconsulting.com	
12832 S. Frontrunner Blvd #100	ONT. O. DON							
CITY Draper	STATE UT	ZIP CODE 6		E TELEPHONE) 650-1921	ALTERNATE T	ELEPHON	FAX TELEPHONE (866) 390-1076	
2. CONTACT INFORMATION - AGENT, A			<u>, </u>		plicable - (REF	RESEN		
NAME OF AGENT, ATTORNEY, OR RELATIVE (LAST, FIRE Kotschedoff, Amy					EMAIL ADDRESS	-	sataxconsulting.com	<u>-</u>
COMPANY NAME Versatax Consulting					•			
CONTACT PERSON IF OTHER THAN ABOVE (LAST, FIRS	T, MIDDLE INTI	TAL)						
•								
MAILING ADDRESS (STREET ADDRESS OR P. O. BOX) 23052 Alicia Parkway #H-372								
CITY	STATE	ZIP CODE	MITYAÇ	E_TELEPHONE	ALTERNATE T	ELEPHON	FAX TELEPHONE	
Mission Viejo	CA	92692	(310) 650-1921	(310) 6	0-1921	(866) 390-1076	
attorney as indicated in the Certification applicant is a business entity, the agent The person named in Section 2 above is enter in stipulati	's authoriz hereby au	ation must be sig	ned i	y an officer agent in this	or authorized e application, an	mploye d may i	ee of the business. nspect assessor's reco	
SIGNATURE OF APPLICANT, OFFICER, OR AUTHORIZED		onto, and otherwis	-	TLE	Jane 1	ppnout	DATE	
>								
ASSESSOR'S PARCEL NUMBER	ASSE	SSMENT NUMBER			FEE NUMBER	00		
ACCOUNT NUMBER		800-006-499-000 TAX BILL NUMBER			555-006-000-000			
NOOSSIN NOMBER	1700	BILL NOWBER						
PROPERTY ADDRESS OR LOCATION EQUIP LOC: VARIOUS	<u>'</u>				DOING BUSINE	SS AS (E	(DBA), if appropriate	
PROPERTY TYPE								
SINGLE-FAMILY / CONDOMINIUM / TOV	WNHOUSE /	DUPLEX] AG	RICULTURAL		□ PO	SSESSORY INTEREST	
☐ MULTI-FAMILY/APARTMENTS: NO, OF U	JNITS] MAI	NUFACTURE	HOME	□ VA	CANT LAND	
☐ COMMERCIAL/INDUSTRIAL			WAT	TER CRAFT		☐ Alf	RCRAFT	
☑ BUSINESS PERSONAL PROPERTY/FIX	TURES) OTH	IER:				
4. VALUE	A. \	ALUE ON ROLL		B. APPLICANT'S	S OPINION OF VAI	UE	C. APPEALS BOARD USE	ONLY
LAND								
IMPROVEMENTS/STRUCTURES								
FIXTURES		1,077,9	70		500	,000		
PERSONAL PROPERTY (see instructions)			_			-		
MINERAL RIGHTS			+			<u> </u>		
TREES & VINES								
OTHER			\top					
TOTAL		1,077,9	70		500	,000		
PENALTIES (amount or percent)			- -	 				

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

Scanlemail to Craig Kay / Assessor 12/1/23

BOE-305-AH (P2) REV. 11 (05-22)

5. TY	PE OF ASSESSMENT BEING APPEALED 🇹 Check only one. See instructions for filing periods
	REGULAR ASSESSMENT – VALUE AS OF JANUARY 1 OF THE CURRENT YEAR
	SUPPLEMENTAL ASSESSMENT
	*DATE OF NOTICE: ROLL YEAR:
	*DATE OF NOTICE: **ROLLYEAR
	*Must attach copy of notice or bill, where applicable **Each roll year requires a separate application
6. RE	ASON FOR FILING APPEAL (FACTS) See instructions before completing this section.
	ou are uncertain of which item to check, please check "I. OTHER" and provide a brief explanation of your reasons for filing this application. e reasons that I rely upon to support requested changes in value are as follows:
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	Assessor's reduced value is incorrect for property damaged by misfortune or calamity.
	BUSINESS PERSONAL PROPERTY/FIXTURES. Assessor's value of personal property and/or fixtures exceeds market value.
	☑ 1. All personal property/fixtures. □ 2. Only a particle of the personal property/fixtures. Attach description of these items.
	 2. Only a portion of the personal property/fixtures. Attach description of those items. PENALTY ASSESSMENT
	□ Penalty assessment is not justified.
	CLASSIFICATION/ALLOCATION
	☑ 1. Classification of property is incorrect,
	2. Allocation of value of property is incorrect (e.g., between land and improvements).
	APPEAL AFTER AN AUDIT. Must include description of each property, issues being appealed, and your opinion of value.
	 1. Amount of escape assessment is incorrect. 2. Assessment of other property of the assessee at the location is incorrect.
	OTHER This assessment may have incorrectly removed the solar exclusion.
	Explanation (attach sheet if necessary) Also, see the attached Exhibit A.
7. WF	RITTEN FINDINGS OF FACTS (\$405.05 per application)
	Are requested.
8. TH	IS APPLICATION IS DESIGNATED AS A CLAIM FOR REFUND See instructions.
	Yes 🗌 No
	CERTIFICATION
	fy (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any opanying statements or documents, is true, correct, and complete to the best of my knowledge and belief and that I am (1) the owner of the
prope	rty or the person affected (i.e., a person having a direct economic interest in the payment of taxes on that property "The Applicant"), (2) an
agent Numb	t authorized by the applicant under item 2 of this application, or (3) an attorney licensed to practice law in the State of California, State Bar per, who has been retained by the applicant and has been authorized by that person to file this application.
SIGNAT	
	Rancho Santa Margarita, CA 10/8/2023
•	Pigase Print)
<u></u>	Kotschedoff
_	STATUS (IDENTIFY RELATIONSHIP TO APPLICANT NAMED IN SECTION 1)
$\overline{\mathbf{V}}$	OWNER AGENT ATTORNEY SPOUSE REGISTERED DOMESTIC PARTNER CHILD PARENT PERSON AFFECTED
	CORPORATE OFFICER OR DESIGNATED EMPLOYEE