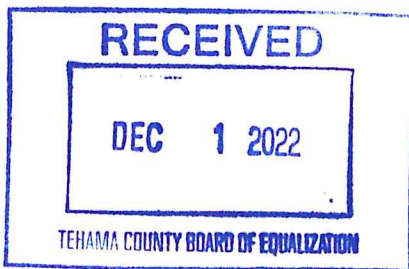


ASSESSMENT APPEAL APPLICATION

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 appeal. Applicants should be prepared to submit additional information if requested by the assessor or at the time of the hearing. Failure to provide information at the hearing the appeals board considers necessary may result in the continuance of the hearing or denial of the appeal. **Do not attach hearing evidence to this application.**



FILED

APPLICATION NUMBER: Clerk Use Only

32-2022

1. APPLICANT INFORMATION - PLEASE PRINT

NAME OF APPLICANT (LAST, FIRST, MIDDLE INITIAL), BUSINESS, OR TRUST NAME
Davita, Inc. (as affected party)

EMAIL ADDRESS

MAILING ADDRESS OF APPLICANT (STREET ADDRESS OR P. O. BOX)

1102 18th Avenue South

CITY Nashville	STATE TN	ZIP CODE 37212	DAYTIME TELEPHONE () ()	ALTERNATE TELEPHONE () ()	FAX TELEPHONE () ()
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2. CONTACT INFORMATION - AGENT, ATTORNEY, OR RELATIVE OF APPLICANT if applicable - (REPRESENTATION IS OPTIONAL)

NAME OF AGENT, ATTORNEY, OR RELATIVE (LAST, FIRST, MIDDLE INITIAL)

DePasquale, Kelley & Company

EMAIL ADDRESS

consultant@dkctax.com

COMPANY NAME

DePasquale, Kelley & Company

CONTACT PERSON IF OTHER THAN ABOVE (LAST, FIRST, MIDDLE INITIAL)

DePasquale, James R.

MAILING ADDRESS (STREET ADDRESS OR P. O. BOX)

19200 Von Karman Avenue, Suite 1000

CITY Irvine	STATE CA	ZIP CODE 92612	DAYTIME TELEPHONE (949) 236-3720	ALTERNATE TELEPHONE () ()	FAX TELEPHONE (949) 236-3710
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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

See attached

TITLE

DATE

3. PROPERTY IDENTIFICATION INFORMATION

Yes 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

ASSESSOR'S PARCEL NUMBER 035-070-076-000	ASSESSMENT NUMBER	FEE NUMBER
ACCOUNT NUMBER	TAX BILL NUMBER	

PROPERTY ADDRESS OR LOCATION

2455 Sr Mary Columba Drive, Red Bluff

DOING BUSINESS AS (DBA), if appropriate

PROPERTY TYPE

- | | | |
|---|--|--|
| <input type="checkbox"/> SINGLE-FAMILY / CONDOMINIUM / TOWNHOUSE / DUPLEX | <input type="checkbox"/> AGRICULTURAL | <input type="checkbox"/> POSSESSORY INTEREST |
| <input type="checkbox"/> MULTI-FAMILY/APARTMENTS: NO. OF UNITS _____ | <input type="checkbox"/> MANUFACTURED HOME | <input type="checkbox"/> VACANT LAND |
| <input checked="" type="checkbox"/> COMMERCIAL/INDUSTRIAL | <input type="checkbox"/> WATER CRAFT | <input type="checkbox"/> AIRCRAFT |
| <input type="checkbox"/> BUSINESS PERSONAL PROPERTY/FIXTURES | <input type="checkbox"/> OTHER: _____ | |

4. VALUE	A. VALUE ON ROLL	B. APPLICANT'S OPINION OF VALUE	C. APPEALS BOARD USE ONLY
LAND	1,859,196	185,919	
IMPROVEMENTS/STRUCTURES	1,749,832	174,983	
FIXTURES			
PERSONAL PROPERTY (see instructions)			
MINERAL RIGHTS			
TREES & VINES			
OTHER			
TOTAL	3,609,028	360,902	
PENALTIES (amount or percent)			

5. TYPE 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: _____
 - 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*

6. REASON FOR FILING APPEAL (FACTS) *See instructions before completing this section.*

If you are uncertain of which item to check, please check "I. OTHER" and provide a brief explanation of your reasons for filing this application. The reasons that I rely upon to support requested changes in value are as follows:

- A. DECLINE IN VALUE
 - The assessor's roll value exceeds the market value as of January 1 of the current year.
- B. 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.
- C. 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.
- D. CALAMITY REASSESSMENT
 - Assessor's reduced value is incorrect for property damaged by misfortune or calamity.
- E. BUSINESS PERSONAL PROPERTY/FIXTURES. Assessor's value of personal property and/or fixtures exceeds market value.
 - 1. All personal property/fixtures.
 - 2. Only a portion of the personal property/fixtures. Attach description of those items.
- F. PENALTY ASSESSMENT
 - Penalty assessment is not justified.
- G. CLASSIFICATION/ALLOCATION
 - 1. Classification of property is incorrect.
 - 2. Allocation of value of property is incorrect (e.g., between land and improvements).
- H. 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.
- I. OTHER Potentially double assessed
 - Explanation (attach sheet if necessary) _____

7. WRITTEN FINDINGS OF FACTS (\$ _____ per _____)

- Are requested. Are not requested.

8. THIS APPLICATION IS DESIGNATED AS A CLAIM FOR REFUND *See instructions.*

- Yes No

CERTIFICATION

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying 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 property 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 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 Number _____, who has been retained by the applicant and has been authorized by that person to file this application.

SIGNATURE (Use Blue Pen - Original signature required on paper-filed application) 	SIGNED AT (CITY, STATE) Irvine, CA	DATE 11-27-22
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NAME (Please Print)
Tanner J. Bral

FILING STATUS (IDENTIFY RELATIONSHIP TO APPLICANT NAMED IN SECTION 1)

- OWNER AGENT ATTORNEY SPOUSE REGISTERED DOMESTIC PARTNER CHILD PARENT PERSON AFFECTED
- CORPORATE OFFICER OR DESIGNATED EMPLOYEE

Authorization of Tax Agent

Davita, Inc. (as affected party) ("Taxpayer") as owner or affected party for the specified property/parcels listed below, hereby appoints DePasquale, Kelley & Company, a California corporation ("Representative") to represent Taxpayer in all matters pertaining to property tax assessments during the calendar year 2022. As required, Representative may file business personal property returns/renditions, file applications for reduced assessments for all tax years affected due to notices of assessed value changes, supplemental tax bills or other assessment changes issued by the referenced county during the aforementioned calendar year. Representative may request documentation from said county, negotiate on behalf of Taxpayer with representatives of the assessor's office, auditor-controller's office, and tax collector's office, and appear before appropriate assessment appeal boards in the referenced county. Representative shall provide a copy of application for reduced assessment to the Taxpayer.

Bonnie Baines

Print Name

Signature

(signed by owner, managing member or authorized employee)

Director of Lease Administration

Title

Date

11/17/2022

Property: Red Bluff Dialysis Center

County: Tehama

AIN: 035-070-076-000

Situs: 2455 Sister Mary Columba Drive

DePasquale, Kelley & Company
19200 Von Karman Avenue, Suite 1000
Irvine, CA 92612
(949) 236-3720 Tel
(949) 236-3710 Fax
Attn: James R. DePasquale, President of Agent
consultant@dketax.com

Aegis (RE)

DEPASQUALE, KELLEY & COMPANY

PROPERTY TAX CONSULTANTS

CORPORATE HEADQUARTERS
19200 VON KARMAN AVE, SUITE 1000
IRVINE, CA 92612
TELEPHONE (949) 236-3720
Fax (949) 236-3710

November 23, 2022

County of Tehama
Board of Equalization
633 Washington Street, Suite 12
Red Bluff, CA 96080

Via Certified Mail
7021 1970 0001 0529 0214
Return Receipt Requested

**RE: Application for Changed Assessment
Applicant – Davits Inc. (as affected party)**

Dear Clerk of the Board:

Please find the enclosed Application for changed Assessment “Application” and the appropriate signature authorizing DEPASQUALE, KELLEY AND COMPANY to file applications as agent.

I declare under penalty of perjury under the laws of the State of California, that the foregoing and all information hereon, including any accompanying statements or documents, is true, correct and complete to the best of my knowledge and belief.

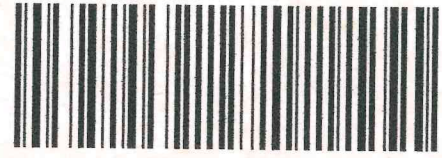
DEPASQUALE, KELLEY & COMPANY



James R. DePasquale
President

JRD/lu
Enclosures

CERTIFIED MAIL®



7021 1970 0001 0528 0214

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FIRST-CLASS



US POSTAGESM PITNEY BOWES



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02 7H
0001307230 NOV 28 2022

**TEHAMA COUNTY BOARD OF EQUALIZATION
P. O. BOX 250
RED BLUFF, CA 96080**

Davita Inc
1102 18th Avenue South
Nashville TN 37212

December 1, 2022

Tehama County Property Owner:

This is to let you know that your Application(s) for Changed Assessment has been received by our office. Your appeal numbers are **32-2022**

Please be aware that due to a high volume of appeals received, there may be a delay in processing your application. The Appeals Board is expected to hear and decide all appeals within two years of the filing of an application. (If you do not have your property taxes impounded through a mortgage, you will still be required to pay all property taxes while awaiting the outcome of your appeal).


Once the Assessor's Office has received your application, they will process your file. If you and the Assessor reach an agreement on value during this process, there will be no need for an Assessment Appeals hearing. If no agreement on value is reached between you and the Assessor's Office, a hearing will be scheduled. You will be given 45 days notice prior to the Assessment Appeals hearing.

Just a reminder, your appeal must be based on the market value of your property as of January 1 of the year in which you are filing. For example, if you file an appeal in 2022, your appeal must be based on the market value of your property as of January 1, 2022.

Thank you for your cooperation and patience as our departments work through this process.

If you have any questions regarding your appeal, please call the Assessor's Office at (530) 527-5931.

JENNIFER VISE, Clerk of the
Tehama County Board of Equalization


Deputy