Department of Assessment

Office: (541) 766-6855 Fax: (541) 766-6398

PO BOX 3020 Corvallis, OR 97339 co.benton.or.us/assessment



REQUEST FOR DISQUALIFICATION FROM SPECIAL ASSESSMENT (Forest Land and Unzoned Farm Land)

| TO: BENTON COUNTY ASSESSOR | | Date |
|--|--------|---------|
| Regarding the parcel of land identified as: | | |
| Account No. | _, Map | Tax Lot |
| I/we hereby request you disqualify: ALL ONLY PART (See attached description or map) | | |
| of the specially assessed land from the following deferral programs: Unzoned Farmland Designated Forestland | | |
| This disqualification is to be effective for the coming tax year and subsequent tax years. I/we acknowledge that you will impose the additional tax or penalty, if any. | | |
| The undersigned are the owners of the above described parcel. | | |

Signature

Phone Number

Signature

Phone Number