



Department of Assessment

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Corvallis, OR 97339

assessment.bentoncountyor.gov

**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