



**REQUEST FOR WITHDRAWAL  
OF  
APPLICATION FOR CHANGED ASSESSMENT**

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I hereby request my Application(s) for Changed Assessment on Assessor's Parcel / Account No(s) listed below be withdrawn:

Application Number(s)

Parcel/Account Number(s)

\_\_\_\_\_  
Signature of Applicant / Agent

\_\_\_\_\_  
Date Signed

**PLEASE SUBMIT COMPLETED FORM BY MAIL OR FAX TO:**

Sutter County Clerk of the Board  
1160 Civic Center Blvd., Suite A  
Yuba City, CA 95993

**OR**

Fax Number: 530/822-7103