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JAN 14 2019

Washoe County Board of Equalization

APN 040-162-50

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APPR JCT

PETITION FOR REVIEW OF TAXABLE VALUATION

WASHOE COUNTY ASSESSOR

Submit this Petition Form no later than 5 p.m. of the date due. Most types of appeals must be filed no later than J. If the appeal involves valuation of property escaping taxation, or a determination that agricultural property has been converted to a higher use, a different due date may apply.

Please Print or Type:

Part A. PROPERTY OWNER/ PETITIONER INFORMATION (Agent's information to be completed in Part H)

NAME OF PROPERTY OWNER AS IT APPEARS ON THE TAX ROLL: The Crossing SC, LLC
NAME OF PETITIONER (IF DIFFERENT THAN PROPERTY OWNER LISTED IN PART A):
MAILING ADDRESS OF PETITIONER (STREET ADDRESS OR P.O. BOX): PO Box 4606
EMAIL ADDRESS: jane@kcorporation.com
CITY: Incline Village STATE: NV ZIP CODE: 89450 DAYTIME PHONE: 775 831-1100 ALTERNATE PHONE: () FAX NUMBER: ()

Part B. PROPERTY OWNER ENTITY DESCRIPTION

Check organization type which best describes the Property Owner if an entity and not a natural person. Natural persons may skip Part B.

- Check boxes for Sole Proprietorship, Trust, Corporation, Limited Liability Company (LLC), General or Limited Partnership, Government or Governmental Agency, and Other, please describe.

The organization described above was formed under the laws of the State of
The organization described above is a non-profit organization. Yes No

Part C. RELATIONSHIP OF PETITIONER TO PROPERTY OWNER IN PART A

Check box which best describes the relationship of Petitioner to Property Owner: Additional information may be necessary.

- Check boxes for Self, Trustee of Trust, Employee of Property Owner, Co-owner, partner, managing member, Officer of Company, Employee or Officer of Management Company, Employee, Officer, or Owner of Lessee of leasehold, possessory interest, or beneficial interest in real property, and Other, please describe.

Part D. PROPERTY IDENTIFICATION INFORMATION

1. Enter Physical Address of Property:

ADDRESS: 6419 STREET/ROAD: South Virginia CITY (IF APPLICABLE): Reno COUNTY: Washoe
Purchase Price: Purchase date:

2. Enter Applicable Assessor Parcel Number (APN) or Personal Property Account Number from assessment notice or tax bill:

ASSESSOR'S PARCEL NUMBER (APN): 040-162-50 ACCOUNT NUMBER:

3. Does this appeal involve multiple parcels? Yes No List multiple parcels on a separate, letter-sized sheet.

If yes, enter number of parcels: Multiple parcel list is attached.

4. Check Property Use Type:

- Check boxes for Vacant Land, Residential Property, Multi-Family Residential Property, Possessory Interest in Real or Personal property, Mobile Home (Not on foundation), Commercial Property, Agricultural Property, Mining Property, Industrial Property, Personal Property.

5. Check Year and Roll Type of Assessment being appealed:

- Check boxes for 2019-2020 Secured Roll, 2018-2019 Reopen, 2018-2019 Unsecured/Supplemental, 2018-2019 Exemption Value.

Part E. VALUE OF PROPERTY

Property Owner: What is the value you seek? Write N/A on each line for values which are not being appealed. See NRS 361.025 for the definition of Full Cash Value.

Table with 3 columns: Property Type, Assessor's Taxable Value, Owner's Opinion of Value. Rows include Land, Buildings, Personal Property, Possessory Interest in real property, Exempt Value, Total.

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Part F. TYPE OF APPEAL

Check box which best describes the authority of the County Board to take jurisdiction to hear the appeal.

- Five checkboxes with corresponding NRS codes and descriptions of appeal grounds.

Part G. WRITE A STATEMENT DESCRIBING THE FACTS AND/OR REASONS FOR YOUR APPEAL, REQUEST FOR REVIEW, OR COMPLAINT.

VERIFICATION

I verify (or declare) under penalty of perjury under the laws of the State of Nevada 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...

Petitioner Signature (handwritten) and Print Name of Signatory (James Hagan).

Title (Manager) and Date (1/11/19).

Part H. AUTHORIZATION OF AGENT Complete this section only if an agent, including an attorney, has been appointed to represent the Property Owner/Petitioner in proceedings before the County Board.

I hereby authorize the agent whose name and contact information appears below to file a petition to the County Board of Equalization and to contest the value and/or exemption established for the properties named in Part D(2) of this Petition.

List additional authorized agents on a separate sheet as needed, including printed name, contact information, signature, title and date.

Authorized Agent Contact Information:

Table with fields for Name of Authorized Agent, Title, Authorized Agent Company, Email Address, Mailing Address, City, State, Zip Code, Daytime Phone, Alternate Phone, and Fax Number.

Authorized Agent must check each applicable statement and sign below.

- Two checkboxes: one for accepting appointment as authorized agent, and one for verifying information under penalty of perjury.

Authorized Agent Signature and Print Name of Signatory.

Title and Date.

Final checkbox: I hereby withdraw my appeal to the County Board of Equalization. Includes fields for Signature of Owner or Authorized Agent/Attorney and Date.

THE CROSSING SHOPPING CENTER, LLC

VIA FAX (775) 328-3642

January 14, 2019

Washoe County Assessor
1001 E 9th St
Reno, NV 89512

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RE: PETITION FOR REVIEW OF TAXABLE VALUATION

Enclosed please find a completed "Petition for Review of Taxable Valuation" for the properties located at 6405, 6407, 6451 and 6419 South Virginia Street, Reno, NV.

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We spoke to your office regarding improvements being misappropriated. In addition, there are questions about differences in the valuation of the parcels.

Please give me a call to discuss.

Sincerely,

Jim Kaplan

775 831-1100 x1

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