79901

COUNTY ASSESSOR -Skamania-

ASSESSOR'S CLASSIFICATION OF FOREST LAND

Sec. 5, RCW Chapter 187, Laws of 1974 1st Ex. Sess.

| | | | | 67 (28 Z) JOS (28 Z) J | GEIVED NIA COUNTY ISTICAL | | |
|------------------------|--|--|-------------------------------|--|---------------------------------|----------|--|
| OWNER: . | Frank H. Morby Cook, Wa. 98605 | | | | MASH | 7 | |
| | | | | 9,600 | S15(133) | | |
| Descripti | ion of Land to be Classified: 40 ac Deed Ref. 56-355 | res the SW-NW of | sec 25 Tw | 3 Range 9 EVM | | | |
| Assessor' | 's Parcel No. <u>3-9-5700</u> | | | - | - | | |
| Beginning all land: | g in 1975, the county assessor is dir s of 20 or more acres which are prima | ected by RCW Chapter 1 rily devoted to, and t | .87 to assess | s and value as CLAS growing and harve | SIPIED FOREST | LAND, | |
| This land | i has been <u>classified</u> as <u>forest land</u> aND until removal of such classificat | as of January 1, 1975 ion for one of the fol | and will cor Llowing reaso | ntinue to be assess ons: | ed as <u>CLASSII</u> | PIED | |
| (a) | Notice from owner to remove classif | ication; | " | 4 1 | | | |
| (6) | Sale to an ownership making land ex | empt from taxation; | N |) ' | | | |
| (c) | Determination by assessor that land timber; | is no longer primaril | ly devoted to | , and used for, gr | owing and har | rvesting | |
| (a) | Determination that a higher and bet | ter use exists for the | land than g | growing and harvest | ing timber. | | |
| Upon remo | oval of this land as <u>CLASSIFIED</u> <u>FORES</u> formulary procedure: | T LAND, a compensating | g tax shall & | oe imposed upon the | land based : | ipon the | |
| Value o | nd Pair of Land at LESS Land Value at Time of Removal | TIPLIED Last Levy Rate Extended Against Land | BY | Number of Years In Classification (Not more than 10) | Comper Tex | neating | |
| The compe | ensating tax shall not be imposed if | the removal resulted a | solely from: | . 1 |) " | | |
| | Transfer to government entity in ex | | | | - | | |
| | A taking or transfer to entity havi | | | | | | |
| (c) | Sale of land within two years after | death of owner owning | at least f | ifty percent (50%) | interest in t | the land | |
| IP : | YOU DO NOT WANT THIS LAND CLASSIFIED | AS POREST LAND, PLEASE | NOTE: | | | | |
| | If it is not your desire to have su assessor's office written notice th | ch land assessed and vereof, on or before Ma | valued as clarch 31, 1975 | assified forest land. (See written no | d, you must g | give the | |
| If you ha | ave any questions regarding the class | ification of this land | l as forest : | land, please contac | t the county | | |
| Phone: _ | 509-427-5633 | Annet | te Hutches | 30 <u>n</u> | | | |
| | | Steven | ison | ,Washington | <u>9864</u> 8 | | |
| ſ | NOTICE TO ASSESSOR | | | | | | |
| | As owner(s) of the land described in this letter, I hereby indicate by signature that I do not desire to have this land classified as forest land by the assessor. | | | | | | |
| } | | Date | | | _, 1975 | | |
| | | Owner(s) | or Contract | Purchaser(s): | | | |
| | | | | | | | |

THIS NOTICE MUST BE RETURNED TO THE ASSESSOR ON OR b. he MARCH 31, 1975.

RECEIPT FOR CERTIFIED MAIL—30¢ (plus postage)

SENT TO POSTMARK OR DATE BANK P.O., STATE AND ZIF CODE OFTIONAL SERVICES FOR ADDITIONAL FEES Shows to whom and data delivered RETURN RECEIPT 2. Shows to whom, date and where delivered ... 35c SERVICES With delivery to addresser only 85e DELIVER TO ACDRESSEE ONLY SPECIAL DELIVERY (extra fee required)

PS Form 3800

LO

NO INSURANCE COVERAGE PROVIDED— NOT FOR INTERNATIONAL MAIL

(See other side)

SENDER: Be sure to fallow instructions on other side

| PLEASE FURNISH SERVICE(S) INDICATED BY CHECKED BLOCK(S) (Additional charges required for these services) | | | | | | | | | |
|---|---------------------|---------------------------|----------------------|--|--|--|--|--|--|
| Show addre where delive | | Deliver ONLY to addressee | | | | | | | |
| RECEIPT Received the numbered article described below | | | | | | | | | |
| EGISTERED NO. | SIGNATURE OR NAM | E OF ADDRESSEE (Muse | always bo filled in) | | | | | | |
| 971725 NSURED NO. | SIGNATURE O | F ADDRESSEE'S AGENT, | IF ANY | | | | | | |
| DATE DELIVERED | SHOW WHERE DELIVERE | O (Only if requested, and | l include ZIP Code) | | | | | | |