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| **Property Owner’s Request For Removal**  **Of Designated Forest Land**  **Under Chapter 84.33 RCW** | | | | | | | | | | | | | | | | | | | | | | | |
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| To | | | | |  | | | | | | | | , County Assessor | | | | |  | | Parcel No. |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| I hereby request removal of my land from forest land designation in accordance with Chapter 84.33 RCW. The complete legal description is: | | | | | | | | | | | | | | | | | | | | | | | |
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| This request for removal includes  all  part of the property originally designated as forest land. The land was | | | | | | | | | | | | | | | | | | | | | | | |
| designated as forest land on | | | | | | | |  | | | | and the approved application was filed under County Auditor’s Record | | | | | | | | | | | |
| No. | | | | | |  | | | | | . I declare that I am aware of the liability for removal from designation to the | | | | | | | | | | | | |
| following extent:   1. Cost of filing the Request for Removal of the land with the County Auditor; and 2. A compensating tax will be imposed and due to the County Treasurer 30 days from the date on the Removal Notice. Any amount unpaid on the due date will be considered delinquent. From the date of delinquency until paid, interest will be charged at the same rate applied by law to delinquent ad valorem property taxes. The compensating tax will be calculated in the following manner: | | | | | | | | | | | | | | | | | | | | | | | |
| True & Fair Value of Land as of January 1 of the Year of Removal | | | Less | | Designated Forest Land Value at Time of Removal | | | | | **Multiplied By** | | | Last Levy Rate Extended Against Land | | **Multiplied By** | | No. of Years in Designation  (Not to Exceed 9) |
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| **I understand that the compensating tax and applicable interest becomes a lien on the land until fully satisfied.** | | | | | | | | | | | | | | | | | | | | | | | |
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| Signature of Property Owner Printed Name of Property Owner | | | | | | | | | | | | | | | | | | | | | | | |
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| Address Phone Number | | | | | | | | | | | | | | | | | | | | | | | |
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| City, State, Zip Code Date | | | | | | | | | | | | | | | | | | | | | | | |
| For tax assistance or to request this document in an alternate format, visit http://dor.wa.gov/content/taxes/property/default.aspx or call  1-800-647-7706. Teletype (TTY) users may call (360) 705-6718.  REV 62 0033 (8/18/10) | | | | | | | | | | | | | | | | | | | | | | | |