



EXECUTIVE OFFICE



BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES

SUBMITTING THE WAIVER AND AGREEMENT FORM ONLINE



EXECUTIVE OFFICE OF THE BOARD OF SUPERVISORS



1. Accessing the Online Waiver and Agreement Form

Step 1: Open an Internet browser and type in the website address for the Assessment Appeals Board website on the browser's URL field:

<https://bos.lacounty.gov/services/assessment-appeals/>

Step 2: Under the “Quick Links” section located on the right navigation panel, click on the “Waiver and Agreement Form (For Online Submission)” link.

ABOUT

Under the authority of the Article 13 of the Constitution of the State of California, the Board of Supervisors established the Assessment Appeals Board to sit as the Board of Equalization of the Los Angeles County. Acting in a quasi-judicial capacity, the Assessment Appeals Board make fair and impartial decisions to settle the valuation disputes between the taxpayers and the Assessor's Office and to equalize the County's property tax roll.

On August 31, 2021, the Board of Supervisors approved an amendment to LA County Code Title 2 establishing a \$46 non-refundable filing fee for assessment appeal applications. Effective October 1, 2021, the fee must be paid when submitting an application. Please click [here](#) to read more.

If paying the fee would cause undue financial hardship, you may request a fee waiver. Waiver forms must be submitted online, in the mail, or in-person along with your application. Hardcopy versions are available [here](#) or from Room B4 at the Kenneth Hahn Hall of Administration.

Click on the following links to learn more about the Assessment Appeals Board:

VIDEO LIBRARY

NEW! Enable "Closed Caption" to Watch Video Tutorials (Language/Translation)

[Video](#)

NEW! Enable "Closed Caption" to Watch Video Tutorials (Language/Translation) - For Mobile Device

[Video](#)

Understanding the Assessment Appeals Process

[English](#) | [Spanish](#)

What is the Assessment Appeals Board?

QUICK LINKS

- File Your Appeals Online
- Hearing Evidence Online Submission
- Case Status Search
- Withdrawal Request (For Online Submission)
- Postpone Hearing Request (For Online Submission)
- **Waiver and Agreement Form (For Online Submission)**
- Public Education Program
- Reference Guides/Forms/Video Library
- Assessment Appeals Hearing Officer Program
- Tax Agent Registration Program
- FAQ
- About Us

Click on the “Waiver and Agreement Form (For Online Submission)” link to access the online form.



Step 3: You may also access the online form via the AAB Resource Center at:

<https://bos.lacounty.gov/services/assessment-appeals/aab-resources/>

2. Enter the Application Information

Step 1: Enter the application number, applicant’s name, and tax agent/attorney’s name, if any.

APPLICATION NUMBER *	<input type="text" value="2022-123456"/>
APPLICANT'S NAME *	<input type="text" value="John Doe"/>
AGENT/ATTORNEY	<input type="text" value="Joe Adams, Tax Agent"/>
	(PRINT NAME AND TITLE, IF APPLICABLE)

Step 2: Enter the Assessor’s Identification Number (also shown on your property tax bill as “####-###-###” for secured property or 4##### for unsecured property). *Note: Unsecured tax bill numbers must have “00” as a prefix to conform to the secured Assessor’s I.D. format.*

I hereby agree to a postponement of hearing on the application specified above which encompasses the following Assessor’s parcel/bill number(s) *

Step 3: Carefully read and review the agreement terms.

I hereby agree to waive my right to have the above-referenced application heard and decided by the Assessment Appeals Board within a two-year period from the date of the filing as set forth in subdivision (c) of Section 1604 of the California Revenue and Taxation Code (“two-year period”). I understand and agree that I may terminate this waiver of the two-year period by delivering a written notice of termination (“termination notice”), in person or by mail, to the Assessment Appeals Board at the address shown in the letterhead above.

I understand and agree that, upon receipt of the termination notice, the Assessment Appeals Board shall hear and decide the above-referenced application within the “extended time period” which is any period of time remaining between the date of execution of this agreement and the expiration of the two-year period, plus one hundred twenty (120) days from the date of receipt by the Assessment Appeals Board of the termination notice.

I understand and agree that the Assessment Appeals Board may set the above-referenced application for hearing at its discretion, or before expiration of the extended time period, whichever is earlier, and in any case, may give written notice of hearing by mail no less than ten (10) days prior to the scheduled date of the hearing.



3. Certifying the Waiver and Agreement Request

Step 1: Enter your email address. Using your mouse or a touchscreen monitor, sign the electronic document on the space provided below.

Email *	<input type="text" value="johndoe@test.com"/>
Signature *	<div style="border: 1px solid black; padding: 10px; text-align: center;"><i>John Doe</i></div> <div style="text-align: right;"><input type="button" value="Clear"/></div>

Step 3: Enter the authorized tax agent/attorney's firm contact information, if any.

Attorney's/agent's firm name (if applicable)	<input type="text" value="Acme Test Agency"/>
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Step 4: Enter your contact information.

Address *	<input type="text" value="500 West Temple Street"/>	
Address		
<input type="text" value="Los Angeles"/>	<input type="text" value="CA"/>	
City	State / Province	
<input type="text" value="90012"/>		
Postal / Zip Code		
Telephone *	<input type="text" value="213-456-7890"/>	



4. Submitting the Waiver and Agreement Request Form Online

Step 1: Click on the “Review/Print PDF” button to review, save, or print the request form in pdf format.



Step 2: The pdf form will now display for review, save, and print.



COUNTY OF LOS ANGELES ASSESSMENT APPEALS BOARD

24 KENNETH HAHN HALL OF ADMINISTRATION, 500 WEST TEMPLE STREET
LOS ANGELES CALIFORNIA 90012
PHONE (213) 974-1471 / FAX (213) 217-4979

WAIVER AND AGREEMENT FOR POSTPONEMENT OF HEARING ON ASSESSMENT APPEALS APPLICATION

APPLICATION NUMBER: 2022-123456

APPLICANT'S NAME: John Doe

AGENT/ATTORNEY: Joe Adams, Tax Agent

(PRINT NAME AND TITLE, IF APPLICABLE)

I hereby agree to a postponement of hearing on the application specified above which encompasses the following Assessor's parcel/bill number(s):

1234-567-890

I hereby agree to waive my right to have the above-referenced application heard and decided by the Assessment Appeals Board within a two-year period from the date of the filing as set forth in subdivision (c) of Section 1604 of the California Revenue and Taxation Code ("two-year period"). I understand and agree that I may terminate this waiver of the two-year period by delivering a written notice of termination ("termination notice"), in person or by mail, to the Assessment Appeals Board at the address shown in the letterhead above.

I understand and agree that, upon receipt of the termination notice, the Assessment Appeals Board shall hear and decide the above-referenced application within the "extended time period" which is any period of time remaining between the date of execution of this agreement and the expiration of the two-year period, plus one hundred twenty (120) days from the date of receipt by the Assessment Appeals Board of the termination notice.

I understand and agree that the Assessment Appeals Board may set the above-referenced application for hearing at its discretion, or before expiration of the extended time period, whichever is earlier, and in any case, may give written notice of hearing by mail no less than ten (10) days prior to the scheduled date of the hearing.

John Doe Signed at:
2023-07-05 16:47:10

Signature

Acme Test Agency

Attorney's/agent's firm name (if applicable)

500 West Temple Street Los Angeles

CA 90012

Address

City

State

Zip Code

(213) 456-7890

2023-07-05

Telephone

Date

FOR AAB USE ONLY

The Assessment Appeals Board agrees to the postponement of hearing and the Clerk will set the application for hearing at a later date and notify the applicant or his/her agent in writing no less than ten (10) days prior to the hearing.

Deputy Clerk

Date

AAB104 Rev. 02/09



Step 3: Read the “Preview Acknowledgement” to certify that all information and statements on the document are accurate and complete, and then click on “Submit”.

Preview Acknowledgment *

I have clicked the Review/Print PDF button and reviewed the final document. I certify that all the information and statements in the document are accurate and complete.

 

Step 4: The Waiver and Agreement for Postponement of Hearing has been submitted for processing.