



# Petition for Adjustment of Benefit Charge Assessment

*\*If your appeal is in regards to square footage, please contact our office before completing this form\**

DUE DATE: All items must be completed and petitions filed before March 4, 2020.

In accordance with the provisions of Chapter 52.18.080 Revised Code of Washington, I, \_\_\_\_\_ do hereby respectfully petition King County Fire Protection District No. 16 Benefit Charge Review Board to change the Benefit Charge Assessment of the following described property for the year 2018 to that amount shown in Item 6 of this form.

- 1. Parcel Number: \_\_\_\_\_  
Property Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

- 2. General Description of Property and Building Usage:  
\_\_\_\_\_  
\_\_\_\_\_

Total Square Footage: \_\_\_\_\_

Sprinkler System? YES \_\_\_\_\_ NO \_\_\_\_\_

- 3. King County Fire Protection District No. 16 Benefit Charge Assessment for the year 2019:  
\$ \_\_\_\_\_

- 4. Specific reason(s) why the Benefit Charge Assessment is being challenged:  
\_\_\_\_\_  
\_\_\_\_\_

- 5. Attached are permits, maps, pictures, letters or other data to substantiate the challenge.  
Brief Description of Exhibit(s): \_\_\_\_\_  
\_\_\_\_\_

- 6. On the basis of the foregoing facts, I request that the Benefit Charge Assessment for this property for the year 2020 be changed to: \$ \_\_\_\_\_

I hereby certify that to the best of my knowledge and belief, the information entered on this petition is a true and fair presentation of the facts relating to this appeal.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 2020.

\_\_\_\_\_  
Owner Signature