



Benefit Charge Appeal Form

Due Date: April 1, 2024

I, _____, own property within the jurisdiction of the South Snohomish County Fire & Rescue Regional Fire Authority and believe my property has been charged too large a Benefit Charge. I seek a reduction of the Benefit Charge assessment for the property identified below to: \$ _____ based on the following:

Parcel Number: _____

Property Address: _____

Phone Number: _____

Mailing Address: _____

Description of Property and Usage: _____

Total Square Footage: _____ Sprinkler System: Yes No

I qualify for the following exemption(s) (choose all that apply, if any):

I meet the income limitations contained RCW 52.26.270. I am, therefore, exempt from 25% 50% 75% (choose one) of the Benefit Charge.

My property meets one of the exemptions in RCW 52.26.180(2) or RCW 52.26.190. The specific exemption I am claiming is for _____

Reason(s) for Reduction*: _____

I request the opportunity to make an oral presentation¹ (check one): yes no

*Attach relevant documents, including permits, maps, pictures, or other data to substantiate the reduction.

I HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE INFORMATION ENTERED ON THIS COMPLAINT IS TRUE AND ACCURATE.

Owner Signature: _____ **Date:** _____

¹ Oral presentations are discretionary with the Review Board.

Return completed form by April 1, 2024: by email to funding@southsnofire.org or mail to RFA Secretary Melissa Blankenship, South County Fire, 12425 Meridian Ave. S., Everett WA 98208.