



TRINITY COUNTY

Board of Supervisors

P.O. BOX 1613, WEAVERVILLE, CALIFORNIA 96093-1613

PHONE (530) 623-1217 FAX (530) 623-8365

NOTICE OF APPEAL OF COMMERCIAL CANNABIS TAX

Appeals submitted using this form are being done so pursuant to Trinity County Code Section 3.26.140

Complete and submit this form to the Clerk of the Board within **fifteen** (15) business days of the serving or mailing of the determination of tax due. A copy of the tax bill being appealed and the final decision from the appeal to the Tax Collector pursuant to Trinity County Code Section 3.26.130 must be attached.

1) APPELLANT INFORMATION – PLEASE PRINT *(a copy of the tax bill must be attached)*

LAST NAME (or BUSINESS NAME <i>if applicable</i>)		MIDDLE INITIAL	FIRST NAME	
MAILING ADDRESS		CITY	STATE	ZIP
PHONE NUMBER	FAX NUMBER	EMAIL ADDRESS		
COMMERCIAL CANNABIS LICENSE NUMBER			PERMIT TYPE	
COMMERCIAL CANNABIS ACTIVITY SITE ADDRESS			CANNABIS ACTIVITY SITE APN	

2) ATTORNEY INFORMATION *(if applicable)* – PLEASE PRINT

NAME OF ATTORNEY		STATE BAR NUMBER		
FIRM NAME				
MAILING ADDRESS		CITY	STATE	ZIP
PHONE NUMBER	FAX NUMBER	EMAIL ADDRESS		

3) TAX COLLECTOR APPEAL INFORMATION *(a copy of the tax collector's decision on appeal must be attached)*

DATE OF APPEAL TO TAX COLLECTOR		DATE OF TAX COLLECTOR DECISION ON APPEAL		
TAX TYPE	ORIGINAL TAX AMOUNT	REVISED TAX AMOUNT	APPELLANT'S OPINION OF TAX AMOUNT	
CULTIVATION - CANNABIS FLOWER				
CULTIVATION - CANNABIS LEAVES				
CULTIVATION - FRESH CANNABIS PLANT				
CANNABIS RETAIL SALES				
1 ST PENALTY				

