



NEVADA COUNTY CALIFORNIA

GINA S. WILL, AUDITOR-CONTROLLER

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DIRECT CHARGE ROLL CORRECTION FORM

Date: _____ Phone: _____

District/Agency: _____ Contact Person: _____

Reason for roll correction request:

Assessment #	Tax Code	Fiscal Year	Current Amt	New Amt

_____ A \$25 fee applies to each correction and will be deducted from the District/Agency fund via journal
Initial

_____ The District/Agency is responsible for any refunds due to the Property Owner as a result of this roll correction
Initial

Authorized Signature: _____ Date: _____

Email completed form to the Property Tax Division at propertytax.auditor@nevadacountyca.gov

FOR AUDITOR USE ONLY

R/C #: _____ Date Processed: _____ Processed By: _____

Fee Amt: _____ Fee Processed: _____ Processed By: _____