## EL DORADO COUNTY BOARD OF SUPERVISORS AGENDA ITEM TRANSMITTAL MEETING OF FEBRUARY 12, 2013

AGENDA TITLE: EXCESS PROCEEDS FROM SAL	E OF TAX DEFAULTED PR	OPERTY DATED NOVEMBER 04, 2011				
DEPARTMENT: AUDITOR-CONTROLLER	DEPT SIGNOFF:	CAO USE ONLY				
CONTACT: SALLY ZUTTER/JOY SHAW ST CONTACT:						
DATE: 01/25/2013 PHONE: 621-5470						
DEPARTMENT SUMMARY AND REQUESTED						
On November 04, 2011, a Sale of Tax Defaulted Property was conducted by the Treasurer-Tax Collector's office. Parties of interest, as defined by Revenue & Taxation (R&T) Code §4675, were notified that the property identified as APN 500-151-63-100 was sold for \$2,735.84 more than the amount required to satisfy delinquent taxes & costs of the sale. Valid claim(s) have been filed for the excess proceeds due to the sale of the property. The Auditor-Controller's office has reviewed the claim(s) and supporting documents and is of the opinion that the claimant(s) are entitled to the proceeds pursuant to R&T Code §4675.  The Auditor-Controller recommends that the Board of Supervisors authorize the Auditor-Controller to notify all valid claimants of the Board's action(s) and disburse excess proceeds as determined by the Board.						
Claimant(s) Type		Recommended Distribution				
	ith Title of Record	\$2,735.84				
1	ode §4674	-0-				
Financial impact? ( ) Yes ( ) No  BUDGET SUMMARY:  Total Est. Cost	Funding Source: ( Other:  CAO Office Use Only: 4\5's Vote Required.	) Gen Fund ( ) Other ( ) Yes( ) No				
Funding	Change in Policy	( ) Yes( ) No				
Budgeted	New Personnel	() Yes() No				
New Funding	CONCURRENCES:	, , , , ,				
Savings	Risk Management _					
Other	County Counsel					
Total Funding	Other					
Change in Net County Cost						
Explain BOARD ACTIONS:						
BOARD ACTIONS:						
Vote: Unanimous Or Ayes:		is is a true and correct copy of an ed into the minutes of the Board of				
Noes:	Date:	and the second s				
Abstentions: Absent:		sin, Board of Supervisors Clerk				



# County of El Dorado OFFICE OF AUDITOR-CONTROLLER

360 FAIR LANE PLACERVILLE, CALIFORNIA 95667 Phone: (530) 621-5487 Fax: (530) 295-2535

JOE HARN, CPA Auditor-Controller BOB TOSCANO
Assistant Auditor-Controller

January 25, 2013

El Dorado County Board of Supervisors 330 Fair Lane Placerville, CA 95667

Honorable Board Members:

#### Title:

Excess Proceeds from the Sale of Tax Defaulted Property dated November 04, 2011

### **Recommendation:**

The Auditor-Controller recommends that the Board of Supervisors authorize the Auditor-Controller to disburse excess proceeds for APN 500-151-63-100 pursuant to the attached information.

#### **Reason for Recommendation:**

The recommendation is based on §4675 of the Revenue and Taxation Code.

## **Fiscal Impact:**

No net impact.

## Action To Be Taken Following Approval:

The Auditor-Controller will disburse funds as directed.

Yours very truly,

Joë Piarn

Auditor-Controller

enclosures

JH/js



## County of El Dorado OFFICE OF AUDITOR-CONTROLLER

360 FAIR LANE PLACERVILLE, CALIFORNIA 95667 (530) 621-5487

> BOB TOSCANO Assistant Auditor-Controller

January 17, 2013

Thomas S Kambara 506-1 Athena Drive Hercules, CA 94547

Re: Notice of Public Hearing for Excess Proceeds Claim from the Sale of Tax Defaulted Property of

November 04, 2011

APN: 500-151-63-100 Default No.: 092244 Excess Proceeds Available: \$2,735.84

Please be advised that the Auditor-Controller will present to the Board of Supervisors only valid original claims for excess proceeds meeting the requirements of Revenue and Taxation (R&T) Code §4675 or other applicable authority. The Auditor-Controller will present all valid claims with a recommendation for distribution to a duly noticed Board of Supervisor's public hearing.

The Auditor-Controller will notify all claimants submitting valid claims of the scheduled public hearing at least 20 calendar days in advance. The notice will include the recommended distribution and copies of any other valid claims for the same property. Parties with valid claims are not required to attend the public hearing; however, you may do so if you wish. Any person(s) interested may attend the public hearing.

Following the determination of distribution for valid claims at the public hearing, the Auditor-Controller will notify valid claimants of the action taken by the Board of Supervisors. Pursuant to R&T Code §4675(b), any action or proceeding to review the decision of the Board of Supervisors must be commenced within 90 calendar days after the date of the Board of Supervisors decision. County warrants will be issued no sooner than 90 days after the date of the decision of the Board of Supervisors.

Please contact Sally Zutter, Accounting Division Manager, or Joy Shaw at the address above, or at 530/621-5470 with any questions.

## **NOTICE OF HEARING**

The El Dorado County Board of Supervisors will hold a public hearing on February 12, 2013, beginning at 9:00 o'clock a.m., regarding the determination of distribution of the excess proceeds for APN 500-151-63-100 from the Sale of Tax Defaulted Property dated November 04, 2011. The hearing will be held at the Board of Supervisors chambers located in Building A, 330 Fair Lane, Placerville, California, 95667. All claims, proof, supporting documents, and relevant information, submitted by valid claimants meeting the requirements of R&T Code §4675, will be forwarded to the Board of Supervisors office prior to the public hearing.

## Claimant(s) Names and Addresses:

Thomas S Kambara 506-1 Athena Drive Hercules, CA 94547

			Recommended
Claimant	Claimant Type	\$ Claimed	<b>Distribution</b>
Thomas S Kambara	Person with Title of Record	2,735.84	2,735.84
Unclaimed	R&T Code §4674	-0-	-0-

**里 C. L. Raffety,** C.P.A. **==** 



360 Fair Lane, Placerville, Calif. 95667 Tax Collector (530) 621-5800

#### CLAIM FOR EXCESS PROCEEDS FROM THE SALE OF TAX DEFAULTED PROPERTY

Mail to:	El Dorado County Auditor-Controller Property Tax Division - Attn: Excess Proceeds 360 Fair Lane Placerville CA 95667			
Assessor	Parcel Number: <u>500-151-63-100</u>	Default Number: 092244		
Date of 7	Tax Sale: 11 - 4 - 11	Amount Claimed: \$ 2,735,84		
above-ref	ersigned claimant, request an award from the excerning the property. I am filing this claim within one's Tax Deed to purchaser.	•		
C-1-(D0	by status as a party of interest pursuant to §4675 of T Code). I hereby state that I am a rightful claim			
☐ Lienholder of record prior to recording of tax deed to purchaser.				
Lienholder of record prior to recording of tax deed to purchaser.  Assignee of a lienholder of record prior to recording of tax deed to purchaser.  Any person(s) with title of record to all or any portion of the property prior to the recordation of the tax deed to the purchaser.  If so, list ownership type (check one):				
Ar of	ny person(s) with title of record to all or any port the tax deed to the purchaser.	ion of the property prior to the recordation		
	If so, list ownership type (check one):	## + + 3		
	☐ Joint Tenancy ☐ Tenancy in Common ☐ Sole Owner ☐ Other (please list):	€s (		
	If so, list <i>percentage of ownership</i> for each claim (attach additional list of names, as necessary):	mant to this claim		
	Claimant I Name: Thomas 5, Kambar	Percentage of Ownership: 100 %		
	Claimant 2 Name:	Percentage of Ownership %		
	ssignee of any person(s) with title of record to all cordation of the tax deed to the purchaser.	or any portion of the property prior to the		
	If so, list ownership type (check one):			
	<ul><li>☐ Joint Tenancy</li><li>☐ Tenancy in Common</li><li>☐ Sole Owner</li></ul>			

Other (please list):

If so, list <i>percentage of ownership</i> for each cl (attach additional list of names, as necessary)				
Claimant 1 Name:	Percentage of Ownership: %			
Claimant 2 Name:				
I base my status and right to claim on the attached docun El Dorado County Resolution 342-2003. (Enclose copie				
or interest • the amount still due and payable as	nterest ved reducing the original amount of the lien s of the date of the sale of the tax-defaulted uding a schedule of any calculations) on the loan			
If this claim is an assignment, additional items need to b documentation submitted must be originals. Please review Resolution 342-2003 for further details.				
I affirm under penalty of perjury that the foregoing is tru-	e and correct.			
Executed this 18 day of Prember, 20 12 at Pinole (city and state)				
Signature of Claimant(s): Thomas 5, Kambara  (If more than one claimant, each must sign)  (Claimant signature(s) must be notarized)  Print Name(s): Thomas 5, Kambara				
Print Name(s): Thomas 5, Kaw	n bara			
Daytime Phone Number: $6/0 - 41 - 8488$	<u>'.</u>			
Daytime Phone Number: 5/0-741-8488  Mailing Address: 506-1 Athena Prive				
Mailing City, State, Zip: Hercoles, CA	94547			
<b>Notary:</b> Attach notary statement(s)				