EF-263-A-R07-0617-40000267-1 BOE-263-A (P1) REV. 07 (06-17)

## **QUALIFIED LESSORS' EXEMPTION CLAIM**

PROPERTY USED FOR FREE PUBLIC LIBRARIES AND FREE MUSEUMS AND USED EXCLUSIVELY FOR PUBLIC SCHOOLS, COMMUNITY COLLEGES, STATE COLLEGES, STATE UNIVERSITIES, UNIVERSITY OF CALIFORNIA, AND NONPROFIT COLLEGES

> NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)



## Office of Tom J. Bordonaro, Jr. San Luis Obispo County Assessor

County Government Center 1055 Monterey Street, Suite D360 San Luis Obispo, CA 93408 Telephone (805) 781-5643 Fax: (805) 781-5641

To receive one time reporting treatment

Email: Assessor@co.slo.ca.us Web Site: slocounty.ca.gov/assessor

L	الـ	for the exemption, this claim must be filed with the Assessor within 120 days of the commencement date of the lease.		
ENTIFICATION OF APPLICANT				
LESSOR'S CORPORATE OR ORGANIZATION NAME				
MAILING ADDRESS				
CITY, STATE, ZIP CODE				
CORPORATE ID (IF ANY)				
NTIFICATION OF PROPERTY				
ADDRESS OF PROPERTY (NUMBER AND STREET)				FISCAL YEAR OF CLAIM
				20 20
CITY, COUNTY, ZIP CODE			ASSESSOR'S PARC	CEL NUMBER
PROPERTY TYPE  Land  Buildings and Improvements  Personal Property	property and the name PRIMARY USE	and address of the	INCIDENT	TAL USE
<ul> <li>Yes □ No The lease confers upon the lesser</li> <li>□ Yes □ No As used herein a qualifying inst community college, state college</li> <li>□ Yes □ No The lessee institution has the op (one dollar) or any other nominal</li> </ul>	itution is one whose property q e, state university, University of o otion at the end of the lease terr	ualifies for the free California, or nonpro	public library, free r fit college property to	ax exemption.
Important: A lessee's affidavit, in which the lesse will result in denial of one time reporting treatmen	e attests to the above statemen			ete the lessee's affidavit
	CERTIFICATION	N		
I certify (or declare) under penalty of perjury under accompanying statements of	er the laws of the State of Califo or documents, is true and correc			
SIGNATURE OF PERSON MAKING CLAIM			DATE	
NAME OF PERSON MAKING CLAIM			TITLE	
EMAIL ADDRESS			DAYTIME TELEPHONI	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



## RETURN THIS AFFIDAVIT TO LESSOR

## AFFIDAVIT FOR EXECUTION BY QUALIFYING INSTITUTIONAL LESSEE

NAME OF QUALIFYING LESSEE INSTITUTION			
MAILING ADDRESS			
CITY, STATE, ZIP CODE			
$\sqrt{}$ Check the type of qualifying use of th	ne property		
☐ FREE PUBLIC LIBRARY	☐ COMMUNITY COLLEGE	UNIVERSITY OF CALIFORNIA	
☐ FREE MUSEUM	☐ STATE COLLEGE	☐ NONPROFIT COLLEGE	
☐ PUBLIC SCHOOL	☐ STATE UNIVERSITY		
AME OF LESSOR			
AILING ADDRESS			
ITY, STATE, ZIP CODE			
OMMENCEMENT DATE OF LEASE	MENCEMENT DATE OF LEASE DATE PROPERTY PUT		
	PLEASE ATTACH A COPY OF THE LEASE AGRE	EMENIT	
	PLEASE ATTACH A COPT OF THE LEASE AGRE	ELIVIEINI	
Yes No The lessee institution hat (one dollar) or any other	as the option at the end of the lease term of acquiring nominal sum.	the above property described in the lease for \$1	
	CERTIFICATION		
	iury under the laws of the State of California that the forements or documents, is true and correct to the best		
GNATURE OF PERSON MAKING CLAIM		DATE	
AME OF PERSON MAKING CLAIM		TITLE	
MAIL ADDRESS		DAYTIME TELEPHONE	
LWALADALOO		( )	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

