EF-268-B-R10-0514-13000740-1 BOE-268-B (P1) REV. 10 (05-14)

FREE PUBLIC LIBRARY OR FREE MUSEUM CLAIM

PROPERTY USED SOLELY FOR EITHER A FREE PUBLIC LIBRARY OR FREE MUSEUM.

Roy D. Buckner Imperial County Assessor 940 W. Main Street Suite 115

El Centro, CA 92243 Main Office: (442) 265-1300 Website: assessor.imperialcounty.org

This claim is filed for fiscal year 20_ - 20

(Example: a person filing a timely claim in January 2011 would enter "2011-2012.")

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

		with the Assessor by February 15.				
	L		١			
NA	ME OF PERSON M	AKING CLAIM		TITLE		
NA	ME AND ADDRESS	OF OWNER OF LAND AND BUILDINGS (if different from	om above)			
NA	ME OF INSTITUTIO	DN .				
MA	ILING ADDRESS O	F INSTITUTION (CITY, STATE, ZIP CODE)				
AD	DRESS OF PROPE	RTY (NUMBER AND STREET)		ASSESSOR'S PARCEL NUMBER		
CIT	TY, COUNTY, ZIP CO	DDE		LEASE TERMINATION DATE		
DA	YS OF THE WEEK	OPEN TO THE PUBLIC AND HOURS OF OPERATION				
	Check the type	of qualifying exclusive use of the property. If	filing for the first time, attacl	h a copy of the lease or agreement.		
_	LIBRARY	MUSEUM				
1.	☐ Yes ☐ No	Is admittance to the library or museum free?	If no, please explain:			
2.	*Yes No	If a library, is there a user charge for the use	of books, periodicals, or fac	cilities?		
3.	*Yes No	If a museum, is there a charge for viewing th	e museum contents?			
		Office immediately. The deadline for timely fi	lling a Claim for Welfare Exe	led for the property, please contact the Assessor's emption is February 15 each year. Where there is a organization and the use of the property meet all of		
4.	☐ Yes ☐ No	Is the property, or a portion thereof, for which income as defined in section 512 of the Inter		pookstore that generates unrelated business taxable		
				ernal Revenue Service must accompany this claim. business taxable income to the bookstore's gross		
5.	☐ Yes ☐ No	Is any of the owned property used for sales of	r business purposes other the	han a bookstore? If yes, please explain:		
6.	☐ Yes ☐ No	Is any equipment or other property at this loc	ation being leased or rented	from someone else?		
		If yes , list in the remarks section the name a property. "Exclusive use" is not required for the		nd the type, make, model, and serial number of the possession is sufficient evidence of use.		
		The benefit of a property tax exemption must axes paid by the lessor. See section 202.2 o		ion; the lessee may be entitled to claim a refund of Code.		

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



7. List only property that is owned. Leased property may also be exempt if listed under the remarks section below. If leased property is listed, it is not necessary for the lessor to also claim the exemption on the Lessors' Exemption Claim.

PROPERTY DESCRIPT	ION	STATE PRIMARY AND INCIDENTAL USE OF PROPERTY DESCRIBE	
Land: (Legal description or map book, page from most recent tax statement)	e and parcel number	Primary use: Incidental use:	
Area: (Acres or square feet)		incidental use.	
10 u.u.		D:	
Buildings and Improvements Bldg. No. No. of Type of or Name Floors Rooms Construction		Primary use:	
		Incidental use:	
Personal Property: Describe - include cost and acquisition dates if		Primary use:	
applicable. (Attach a separate sheet if necess		Incidental use:	
EMARKS			
	contact during normal	business hours for additional inf	
IAME			TITLE
DAYTIME TELEPHONE EMAIL	LADDRESS		I
I certify (or declare) under penalty of perjury including any accompanying stateme		FICATION ate of California that the foregoing and complete to the best of	d all information contained herein my knowledge and belief.
NAME OF PERSON MAKING CLAIM	,,	, , , , , , , , , , , , , , , , , , , ,	TITLE
SIGNATURE OF PERSON MAKING CLAIM			DATE

