EF-263-B-R03-0519-16000387-1

BOE-263-B (P1) REV. 03 (05-19)

## LESSEES' EXEMPTION CLAIM

Declaration of property information as of 12:01 a.m., January 1, 20\_\_\_.



Kristine Lee Kings County Assessor

1400 W. Lacey Blvd. Hanford, CA 93230 559-852-2486 Fax: 559-582-2794

## PROPERTY **USED EXCLUSIVELY FOR** PUBLIC SCHOOLS, COMMUNITY COLLEGES, STATE COLLEGES, STATE UNIVERSITIES, OR UNIVERSITY OF CALIFORNIA [Revenue and Taxation Code section 202(a)(3)]

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

			e the full exemption, this claim must
L	. L	be filed w	vith the Assessor by February 15.
IDENTIFICATION OF APPLICANT			
LESSEE'S CORPORATE OR ORGANIZATION NAME			
MAILING ADDRESS			
CITY, STATE, ZIP CODE			
CORPORATE ID (IF ANY)			
IDENTIFICATION OF PROPERTY			
ADDRESS OF PROPERTY (NUMBER AND STREET)			
CITY, COUNTY, ZIP CODE			ASSESSOR'S PARCEL NUMBER
USE OF PROPERTY Check and state the The exemption claim is made for the following p	primary and incidental qualifying uses of the		nch a list that clearly identifies the
The exemplest claim to made to the tollowing p	property and the name and addres		
PROPERTY TYPE	PRIMARY USE		INCIDENTAL USE
☐ Land			
☐ Buildings and Improvements			
☐ Personal Property			
Yes No Does the lease/agreement conf	fer upon the lessee the exclusive right to pos	session ar	nd use of the property?
	rator of real or personal property owned by a California that is used exclusively for commiss?		
Yes No Does the claimant own personal	al property used at this property for public sch	nool purpo	ses?
Note: If requested by the assessor, the claimant	t shall provide a copy of the lease or agreem	ent.	
	CERTIFICATION		
I certify (or declare) under penalty of perjury und accompanying statements	der the laws of the State of California that the s or documents, is true and correct to the bes		
SIGNATURE OF PERSON MAKING CLAIM			DATE
NAME OF PERSON MAKING CLAIM			TITLE
E-MAIL ADDRESS			DAYTIME TELEPHONE

