EF-502-P-R03-0516-31000382-1 BOE-502-P (P1) REV. 03 (05-16)

POSSESSORY INTERESTS ANNUAL USAGE REPORT



Matthew R. Maynard Placer County Assessor

2980 Richardson Drive Auburn, CA 95603-2640 Phone: (530) 889-4300

Email: assessor@placer.ca.gov Website: www.placer.ca.gov/assessor

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

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or more taxable po information identifying rise to the taxable pa form with the Assess	ssessory interests have I ng the holders of a taxable cossessory interests. If you or by February 15 . Report	peen created or e possessory into ur agency owns a all taxable posses	renewed erest, the ny prope ssory inte	al governmental entity that is the fee owner of real property in which one to provide the assessor of the county in which the property is located to property involved, and the terms and conditions of the agreement giving rty with taxable possessory interests, you are required to complete and file this terests occurring in the prior year even if they ended in the prior year. TY OWNED BY THIS AGENCY, CHECK HERE, AND SIGN, DATE,			
	FORM TO THE ADDRESS			THOWNED BY THIS AGENCY, CHECK HERE, AND SIGN, DATE,			
		PF	ROPER	RTY USAGE			
NAME OF TENANT/LESSEE/PERMITTEE			MAILING ADDRESS				
LOCATION/DESCRIPTION OF SUBJECT PROPERTY			DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED				
TYPE OF TRANSACTION (check one) CREATION RENEWAL SUBLEASE ASSIGNMENT				AMOUNT AND TYPE OF CONSIDERATION (i.e. gross, full service, NNN, other)			
TERM OF POSSESSORY INTEREST (including renewal or extension options)			AGENCY PAID EXPENSES (if any, enter dollar amount)				
SUBLEASE	ORIGINAL TERM	REMAINING TERM	Л	CONSIDERATION PAID FOR MASTER LEASE			
ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	CONSIDERATION PAID FOR UNDERLYING LEASE				
			1				
NAME OF TENANT/LES	SSEE/PERMITTEE		MAILING	SADDRESS			
LOCATION/DESCRIPTION OF SUBJECT PROPERTY				DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED			
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TERM OF POSSESSORY INTEREST (including renewal or extension options)				AGENCY PAID EXPENSES (if any, enter dollar amount)			
SUBLEASE	ORIGINAL TERM	REMAINING TERM	Й	CONSIDERATION PAID FOR MASTER LEASE			
ASSIGNMENTS ORIGINAL TERM REMAINING TERM			CONSIDERATION PAID FOR UNDERLYING LEASE				
NAME OF TENANT/LESSEE/PERMITTEE				MAILING ADDRESS			
LOCATION/DESCRIPTION OF SUBJECT PROPERTY				DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED			
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TERM OF POSSESSORY INTEREST (including renewal or extension options)				AGENCY PAID EXPENSES (if any, enter dollar amount)			
SUBLEASE	ORIGINAL TERM	REMAINING TERM	Й	CONSIDERATION PAID FOR MASTER LEASE			
ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	Л	CONSIDERATION PAID FOR UNDERLYING LEASE			

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



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PROPERTY USAGE									
NAME OF TENANT/LESSEE/PERMITTEE				MAILING ADDRESS					
LOCATION/DESCRIPTION OF SUBJECT PROPERTY				DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED					
TYPE OF TRANSACTION (check one) CREATION RENEWAL SUBLEASE ASSIGNMENT				AMOUNT AND TYPE OF CONSIDERATION (i.e. gross, full service, NNN, other)					
TERM OF POSSESSORY INTEREST (including renewal or extension options)				AGENCY PAID EXPENSES (if any, enter dollar amount)					
SUBLEASE	ORIGINAL TERM	REMAINING TERM	И	CONSIDERATION PAID FOR MA	ASTER LEASE				
ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	И	CONSIDERATION PAID FOR UNDERLYING LEASE					
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TERM OF POSSESSO	RY INTEREST (including renewal	or extension options)	AGENC	Y PAID EXPENSES (if any, enter dolo	lar amount)				
SUBLEASE	ORIGINAL TERM	REMAINING TERM	Й	CONSIDERATION PAID FOR MA	ASTER LEASE				
ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	Л	CONSIDERATION PAID FOR UNDERLYING LEASE					
NAME OF TENANT/LESSEE/PERMITTEE MAILING ADDRESS									
LOCATION/DESCRIPTION OF SUBJECT PROPERTY				DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED					
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ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	Л	CONSIDERATION PAID FOR UNDERLYING LEASE					
CERTIFICATION									
of my knowledge a	and belief it is true, correct ared by a duly authorized	ct, and complete	ng acco and co	mpanying schedules, state vers any property required	ments or other attachments, and to the best to be reported by the agency named in the on declaration is based on all the information				
SIGNATURE OF AGEN	CY REPRESENTATIVE/PREPA		DATE						
NAME OF AGENCY RE	EPRESENTATIVE	TITLE							
NAME OF PREPARER			TITLE						
PREPARER'S EMAIL A	DDRESS	DAYTIME TELEPHONE NUMBER ()							

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