EF-502-P-R02-0511-33000787-1 BOE-502-P (P1) REV. 02 (05-11)

POSSESSORY INTERESTS ANNUAL USAGE REPORT



Peter Aldana Assessor-County Clerk-Recorder

County of Riverside PO Box 751 Riverside, CA 92502-0751 Phone: (951) 955-6200 https://www.rivcoacr.org/

NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)	٦	
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Revenue and Taxation Code section 480.6 requires every state or local governmental entity that is the fee owner of real property in which one or more taxable possessory interests have been created or renewed to provide the assessor of the county in which the property is located information identifying the holders of a taxable possessory interest, the property involved, and the terms and conditions of the agreement giving rise to the taxable possessory interests. If, as of January 1 this year, your agency owns any property with taxable possessory interests, you are required to complete and file this form with the county assessor by **February 15**.

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		PF	ROPER	RTY USAGE		
NAME OF HOLDER OF POSSESSORY INTEREST			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	Л	CONSIDERATION PAID FOR UNDERLYING LEASE		
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ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	М	CONSIDERATION PAID FOR UNDERLYING LEASE		
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of my knowledge a statement. If prepa	and belief it is true, corre	ect, and complete	ng acco	ompanying schedules, state overs any property required	ements or other attachments, and to the best It to be reported by the agency named in the on declaration is based on all the information	
SIGNATURE OF AGENCY REPRESENTATIVE/PREPARER					DATE	
NAME OF AGENCY REPRESENTATIVE					TITLE	
NAME OF PREPARER					TITLE	
PREPARER'S EMAIL ADDRESS					DAYTIME TELEPHONE NUMBER	

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