

## THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

NAME OF TENANT/LESSEE/PERMITTEE				MAILING ADDRESS				
LOCATION/DESCRIPTION OF SUBJECT PROPERTY			DATE OI	DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED				
			AMOUNT AND TYPE OF CONSIDERATION (i.e. gross, full service, NNN, other) AGENCY PAID EXPENSES (if any, enter dollar amount)					
SUBLEASE	ORIGINAL TERM	REMAINING TERM	Λ	CONSIDERATION PAID FOR MASTER LEASE				
ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	Λ	CONSIDERATION PAID FOR UNDERLYING LEASE				

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	DN (check one) RENEWAL SUBLEASE	ASSIGNMENT	AMOUN	TAND TYPE OF CONSIDERATION (i.e. gross, full service, NNN, other)
TERM OF POSSESSOR	RY INTEREST (including renewal	or extension options)	AGENC	Y PAID EXPENSES (if any, enter dollar amount)
SUBLEASE	ORIGINAL TERM	REMAINING TERM	1	CONSIDERATION PAID FOR MASTER LEASE
	ORIGINAL TERM	REMAINING TERM	1	CONSIDERATION PAID FOR UNDERLYING LEASE

TYPE OF TRANSACTION (check one)			AMOUNT AND TYPE OF CONSIDERATION (i.e. gross, full service, NNN, other)				
CREATION RENEWAL SUBLEASE ASSIGNMENT							
TERM OF POSSESSORY INTEREST (including renewal or extension options)		AGENCY	AGENCY PAID EXPENSES (if any, enter dollar amount)				
SUBLEASE	ORIGINAL TERM	REMAINING TERM	1	CONSIDERATION PAID FOR MASTER LEASE			
ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	Λ	CONSIDERATION PAID FOR UNDERLYING LEASE			

MAILING ADDRESS

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IF THERE ARE NO	TAXABLE	POSSESS	ORY INTE	RESTS ON	PROPERTY	OWNED B	Y THIS	AGENCY	, CHECK HERE	, AND SIG	N, DATE,
AND RETURN THE	E FORM TO	THE ADD	RESS SHO	WN ABOVE					-		
				Р	ROPERTY	/ USAGE					

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 your agency owns any property with taxable possessory interests, you are required to complete and file this form with the Assessor by February 15. Report all taxable possessory interests occurring in the prior year even if they ended in the prior year.

MAILING ADDRESS

T. 

(Make necessary corrections to the printed name and mailing address)

BOE-502-P (P1) REV. 03 (05-16) **POSSESSORY INTERESTS** 

EF-502-P-R03-0516-36000574-1

**ANNUAL USAGE REPORT** 

NAME OF TENANT/LESSEE/PERMITTEE

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LOCATION/DESCRIPTION OF SUBJECT PROPERTY

LOCATION/DESCRIPTION OF SUBJECT PROPERTY

NAME AND MAILING ADDRESS



**Josie Gonzales** Assessor-Recorder-County Clerk San Bernardino County

222 W. Hospitality Lane, 4th Floor San Bernardino, CA 92415-0311 arc.sbcounty.gov 909-387-8307 or 1-877-885-7654

DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED

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ASSIGNMENTS

### **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) AMOUNT AND TYPE OF CONSIDERATION (i.e. gross, full service, NNN, other) CREATION RENEWAL SUBLEASE ASSIGNMENT TERM OF POSSESSORY INTEREST (including renewal or extension options) AGENCY PAID EXPENSES (if any, enter dollar amount) **ORIGINAL TERM** REMAINING TERM CONSIDERATION PAID FOR MASTER LEASE SUBLEASE CONSIDERATION PAID FOR UNDERLYING LEASE ORIGINAL TERM REMAINING TERM ASSIGNMENTS 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) AMOUNT AND TYPE OF CONSIDERATION (i.e. gross, full service, NNN, other) CREATION RENEWAL SUBLEASE ASSIGNMENT TERM OF POSSESSORY INTEREST (including renewal or extension options) AGENCY PAID EXPENSES (if any, enter dollar amount) **ORIGINAL TERM** CONSIDERATION PAID FOR MASTER LEASE REMAINING TERM SUBLEASE CONSIDERATION PAID FOR UNDERLYING LEASE **ORIGINAL TERM** REMAINING TERM

NAME OF TENANT/LES	SSEE/PERMITTEE		MAILING	ADDRESS				
LOCATION/DESCRIPTION OF SUBJECT PROPERTY				DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED				
EOCATION/DESCRIPTI	ON OF SUBJECT FROFERIN		DAILO	TRANSACTION IN WHICH A TRAADLE FOSSESSORT INTEREST WAS ACQUIRED				
TYPE OF TRANSACTION (check one)			AMOUNT AND TYPE OF CONSIDERATION (i.e. gross, full service, NNN, other)					
TERM OF POSSESSORY INTEREST (including renewal or extension options)			AGENC	Y PAID EXPENSES (if any, enter dollar amount)				
	ORIGINAL TERM	REMAINING TERM	4	CONSIDERATION PAID FOR MASTER LEASE				
SUBLEASE	ORIGINAL TERM	REMAINING LERN	VI	CONSIDERATION PAID FOR MASTER LEASE				
	ORIGINAL TERM	REMAINING TERM	Λ	CONSIDERATION PAID FOR UNDERLYING LEASE				
ASSIGNMENTS								
		1						

# CERTIFICATION

I certify (or declare) that I have examined this report, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and covers any property required to be reported by the agency named in the statement. If prepared by a duly authorized person other than an agency official, the certification declaration is based on all the information of which the preparer has knowledge.

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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