EF-263-A-R07-0617-38000150-1 BOE-263-A (P1) REV. 07 (06-17)

IDENTIFICATION OF APPLICANT

MAILING ADDRESS

CITY, STATE, ZIP CODE

CORPORATE ID (IF ANY)

IDENTIFICATION OF PROPERTY

CITY, COUNTY, ZIP CODE

Land

QUALIFIED LESSORS' EXEMPTION CLAIM

LESSOR'S CORPORATE OR ORGANIZATION NAME

ADDRESS OF PROPERTY (NUMBER AND STREET)

PROPERTY TYPE

Buildings and Improvements

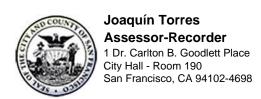
Personal Property

NAME OF PERSON MAKING CLAIM

EMAIL ADDRESS

PROPERTY USED FOR FREE PUBLIC LIBRARIES AND FREE MUSEUMS AND USED EXCLUSIVELY FOR PUBLIC SCHOOLS. COMMUNITY COLLEGES, STATE COLLEGES, STATE UNIVERSITIES, UNIVERSITY OF CALIFORNIA, AND NONPROFIT COLLEGES

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



with the Assessor within 120 days of the commencement date of the lease. FISCAL YEAR OF CLAIM **-** 20 ASSESSOR'S PARCEL NUMBER USE OF PROPERTY

√ Check and state the primary and incidental qualifying uses of the property.

TITLE

INCIDENTAL USE

To receive one time reporting treatment for the exemption, this claim must be filed

Important: A lessee's affidavit, in which the lessee attests to the above statement(s) is provided. Failure to submit/complete the lessee's affidavit will result in denial of one time reporting treatment for the exemption. A separate affidavit is required of each lessee. **CERTIFICATION** I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true and correct to the best of my knowledge and belief. SIGNATURE OF PERSON MAKING CLAIM DATE

The exemption claim is made for the following property: (if there are numerous properties, please attach a list that clearly identifies the

Yes \(\subseteq \text{No} \) The lease confers upon the lessee the exclusive right to possession and use of the property.

PRIMARY USE

Yes No As used herein a qualifying institution is one whose property qualifies for the free public library, free museum, public school, community college, state college, state university, University of California, or nonprofit college property tax exemption.

Yes No The lessee institution has the option at the end of the lease term of acquiring the above property described in the lease for \$1

property and the name and address of the lessee)

DAYTIME TELEPHONE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



(one dollar) or any other nominal sum.

RETURN THIS AFFIDAVIT TO LESSOR

AFFIDAVIT FOR EXECUTION BY QUALIFYING INSTITUTIONAL LESSEE				
NAME OF QUALIFYING LESSEE INSTITUTION				
MAILING ADDRESS				
CITY, STATE, ZIP CODE				
✓ Check the type of qua	alifying use of the property			
☐ FREE PUBLIC LIBRARY		COMMUNIT	Y COLLEGE	☐ UNIVERSITY OF CALIFORNIA
☐ FREE MUSEUM		STATE COLLEGE		☐ NONPROFIT COLLEGE
☐ PUBLIC SCHOOL		STATE UNIVERSITY		
NAME OF LESSOR				
MAILING ADDRESS				
CITY, STATE, ZIP CODE				
COMMENCEMENT DATE OF LEASE			DATE PROPERTY PUT TO EXEMPT USE	
PLEASE ATTACH A COPY OF THE LEASE AGREEMENT				
PLEASE ATTACH A COPT OF THE LEASE AGREEMENT				
The following property is leased as of January 1 of this year. If personal property is being leased, indicate the type, make, model, serial number, etc. Attach a separate listing if necessary.				
PROPERTY TYPE (REAL OR PERSONAL) PROPERTY DESCRIPTION				
(NEXTERNATE)				
		4 4la a a a a a 4 4la a 1 a		shows are and described in the lease for MA
	ar) or any other nominal sum.	t the end of the le	ease term of acquiring the	above property described in the lease for \$1
		CERTIFIC	CATION	
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true and correct to the best of my knowledge and belief.				
SIGNATURE OF PERSON MAKING	CLAIM			DATE
NAME OF PERSON MAKING CLAI	M			TITLE
EMAIL ADDRESS				DAYTIME TELEPHONE
LIMINIC ADDITICOS				/

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

