

#### THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

NAME OF TENANT/LESSEE/PERMITTEE			MAILING	MAILING ADDRESS				
LOCATION/DESCRIPTION OF SUBJECT PROPERTY			DATE O	DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED				
TYPE OF TRANSACTION (check one)			AMOUN	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)			AGENC	AGENCY PAID EXPENSES (if any, enter dollar amount)				
	ORIGINAL TERM	REMAINING TERM	Л	CONSIDERATION PAID FOR MASTER LEASE				
	ORIGINAL TERM	REMAINING TERM	Л	CONSIDERATION PAID FOR UNDERLYING LEASE				

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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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CREATION RENEWAL SUBLEASE ASSIGNMENT							
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TERM OF F033E330F		or extension options)	AGLINC				
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	ORIGINAL TERM	REMAINING TERM	/1	CONSIDERATION PAID FOR MASTER LEASE			
SUBLEASE							
	ORIGINAL TERM	REMAINING TERM	1	CONSIDERATION PAID FOR UNDERLYING LEASE			
ASSIGNMENTS							
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MAILING ADDRESS

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IF THERE ARE NO TA	AXABLE P	OSSES	SORY INT	FERESTS ON	N PROPERTY	OWNED BY	THIS A	GENCY,	CHECK	HERE	, AND SIGN	, DATE,
AND RETURN THE F	ORM TO 1	THE ADD	RESS SI	HOWN ABOV	/E.						-	
				I	PROPERT	Y USAGE						
NAME OF TENANT/LESS	SEE/PERMI	TTEE			MAILING A	DDRESS						

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

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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.

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

1 Crescent Street Quincy, CA 95971 Phone: 530-283-6380

DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED

AMOUNT AND TYPE OF CONSIDERATION (i.e. stress full convice NMM) officer

Fax: (530) 283-6195

EF-502-P-R03-0516-32000262-1 BOE-502-P (P1) REV. 03 (05-16)

## **POSSESSORY INTERESTS ANNUAL USAGE REPORT**

NAME AND MAILING ADDRESS

LOCATION/DESCRIPTION OF SUBJECT PROPERTY

TYPE OF TRANSACTION (check one)

NAME OF TENANT/LESSEE/PERMITTEE



Cynthia L. Froggatt **Plumas County Assessor** 

CindieFroggatt@countyofplumas.com

# PROPERTY USAGE

NAME OF TENANT/LE	SSEE/PERMITTEE		MAILING	ADDRESS			
LOCATION/DESCRIPTION OF SUBJECT PROPERTY			DATE O	F TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED			
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ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	Л	CONSIDERATION PAID FOR UNDERLYING LEASE			

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SUBLEASE								

SUBLEASE			
ASSIGNMENTS	RIGINAL TERM	REMAINING TERM	CONSIDERATION PAID FOR UNDERLYING LEASE

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### 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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