	263-B-R02-0810-08000627-1 E-263-B (P1) REV. 02 (08-10) LESSEES' EXEMPTION CLAIM Declaration of property information as of 12:01 a.m., January 1, 20 PROPERTY USED EXCLUSIVELY FOR PUBLIC SCHOOLS, COMMUNITY COLLEGES, STATE COLLEGES, STATE UNIVERSITIES, OR UNIVERSITY OF CALIFORNIA NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing a	ddress)	Jennifer Perry, Assessor County of Del Norte 981 H Street, Suite 120 Crescent City, CA 95531 Telephone: (707) 464-7200
L De filed with the Assessor by February 13 DENTIFICATION OF APPLICANT ELESSEES CORPORATE OR ORGANIZATION NAME MALLING ADDRESS CITY, STATE, ZIP CODE CORPORATE ID (JF ANY) DENTIFICATION OF PROPERTY ADDRESS OF PROPERTY NUMBER AND STREET) CITY, COUNTY, ZIP CODE USE OF PROPERTY Check and state the primary and incidental qualifying uses of the property. The exemption claim is made for the following property: (if there are numerous properties, please attach a list that clearly identifies the property and the name and address of the lessee) PROPERTY TYPE PRIMARY USE NICIDENTAL USE ROPORATE ID No is the claimant a lessee or operator of real or personal property owned by a public school, community college, state college,			
LESSEE'S CORPORATE OR ORGANIZATION NAME MAILING ADDRESS GITY, STATE, ZIP CODE CORPORATE ID (IF ANY) IDENTIFICATION OF PROPERTY ADDRESS OF PROPERTY (NUMBER AND STREET) GITY, COUNTY, ZIP CODE VISE OF PROPERTY Check and state the primary and incidental qualifying uses of the property. The exemption claim is made for the following property: (if there are numerous properties, please attach a list that clearly identifies the property and the name and address of the lessee) PROPERTY TYPE PRIMARY USE ILand INCIDENTAL USE PROPERTY TYPE PRIMARY USE ILand INCIDENTAL USE Personal Property INCIDENTAL USE Yes No Does the lease/agreement confer upon the lessee the exclusive right to possession and use of the property? Yes No Inversity of California purposes? Note: If requested by the assessor, the claimant shall provide a copy of the lease or agreement. CERTIFICATION I certlify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including accompanying statements or documents, is true and correct to the best of my knowledge and bleef. SIGNATURE OF PERSON MAKING CLAM DATE<	—		To receive the full exemption, this claim must be filed with the Assessor by February 15.
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E-MAIL ADDRESS DAYTIME TELEPHONE ()	NAME OF PERSON MAKING CLAIM		TITLE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

