EF-263-B-R03-0519-16000380-1

BOE-263-B (P1) REV. 03 (05-19)

LESSEES' EXEMPTION CLAIM

Declaration of property information as of 12:01 a.m., January 1, 20___.



Kristine Lee Kings County Assessor

1400 W. Lacey Blvd. Hanford, CA 93230 559-852-2486 Fax: 559-582-2794

PROPERTY **USED EXCLUSIVELY FOR** PUBLIC SCHOOLS, COMMUNITY COLLEGES, STATE COLLEGES, STATE UNIVERSITIES, OR UNIVERSITY OF CALIFORNIA [Revenue and Taxation Code section 202(a)(3)]

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

L	٦	To receive the full exemption, this claim must be filed with the Assessor by February 15.
IDENTIFICATION OF APPLICANT		, ,
LESSEE'S CORPORATE OR ORGANIZATION NAME		
MAILING ADDRESS		
CITY, STATE, ZIP CODE	_	
CORPORATE ID (IF ANY)		
IDENTIFICATION OF PROPERTY		
ADDRESS OF PROPERTY (NUMBER AND STREET)		
CITY, COUNTY, ZIP CODE		ASSESSOR'S PARCEL NUMBER
USE OF PROPERTY Check and state the	primary and incidental qualifying uses of t	the property
The exemption claim is made for the following p		s, please attach a list that clearly identifies the
PROPERTY TYPE	PRIMARY USE	INCIDENTAL USE
Land		
☐ Buildings and Improvements		
☐ Personal Property		
Yes No Does the lease/agreement conf	fer upon the lessee the exclusive right to p	possession and use of the property?
	California that is used exclusively for com	y a public school, community college, state college, nmunity college, state college, state university, or
Yes No Does the claimant own personal	al property used at this property for public	school purposes?
Note: If requested by the assessor, the claimant	t shall provide a copy of the lease or agree	ement.
	CERTIFICATION	
	der the laws of the State of California that t s or documents, is true and correct to the b	the foregoing and all information hereon, including any pest of my knowledge and belief.
SIGNATURE OF PERSON MAKING CLAIM		DATE
NAME OF PERSON MAKING CLAIM		TITLE
E-MAIL ADDRESS		DAYTIME TELEPHONE

