EF-263-A-R07-0617-20000037-1 BOE-263-A (P1) REV. 07 (06-17)

IDENTIFICATION OF APPLICANT

IDENTIFICATION OF PROPERTY

QUALIFIED LESSORS' EXEMPTION CLAIM

■ Buildings and Improvements

Personal Property

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)

(one dollar) or any other nominal sum.

Yes No The lease confers upon the lessee the exclusive right to possession and use of the property.



Brett Frazier Madera County Assessor

200 West 4th Street Madera, CA 93637-3548 Phone: (559) 675-7710 Fax: (559) 675-7654

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

www.maderacounty.com/government/assessor

| L | | with the Assessor within 120 days of the commencement date of the lease. | | |
|---|---|--|------------------------------|--|
| NTIFICATION OF APPLICANT | | | | |
| LESSOR'S CORPORATE OR ORGANIZATION NAME | | | | |
| MAILING ADDRESS | | | | |
| CITY, STATE, ZIP CODE | | | | |
| CORPORATE ID (IF ANY) | | | | |
| NTIFICATION OF PROPERTY | | | | |
| ADDRESS OF PROPERTY (NUMBER AND STREET) | | | FISCAL YEAR OF CLAIM 20 – 20 | |
| CITY, COUNTY, ZIP CODE | | ASSESSOR'S PARC | EL NUMBER | |
| USE OF PROPERTY Check and state the | e primary and incidental qualifying uses | of the property. | | |
| The exemption claim is made for the following | property: (if there are numerous prope property and the name and a | | y identifies the | |
| PROPERTY TYPE | PRIMARY USE | INCIDENTAL USE | | |
| Land | | | | |

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

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

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.

| accompanying statements of accomments, to the accomment and accomment and accomment accomments and accomments are accomments and accomments and accomments are accommentative accommentati | | | | |
|--|-------------------|--|--|--|
| SIGNATURE OF PERSON MAKING CLAIM | DATE | | | |
| | | | | |
| NAME OF PERSON MAKING CLAIM | TITLE | | | |
| | | | | |
| EMAIL ADDRESS | DAYTIME TELEPHONE | | | |
| | () | | | |

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



RETURN THIS AFFIDAVIT TO LESSOR

| NAME OF OUR LEVINO LEGO | AFFIDAVII FOR EXECT | UTION BY QUA | ALIFYING INSTITUTION | UNAL LESSEE | | |
|---|--|-----------------------------|---------------------------------|---|--|--|
| NAME OF QUALIFYING LESS | EE 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 COL | | LEGE NONPROFIT COLLEGE | | | | |
| ☐ PUBLIC SCH | ☐ PUBLIC SCHOOL ☐ STATE UNIVER | | /ERSITY | | | |
| NAME OF LESSOR | | | | | | |
| MAILING ADDRESS | | | | | | |
| CITY, STATE, ZIP CODE | | | | | | |
| COMMENCEMENT DATE OF LEASE | | DATE PROPERTY PUT TO E | DATE PROPERTY PUT TO EXEMPT USE | | | |
| | ΡΙ ΕΔΩΕ ΔΤΤ | | F THE LEASE AGREEM | ENT . | | |
| | I LLAGE ATT | ACITA COL I OI | THE LEASE AGNEEM | LIVI | | |
| | | | | | | |
| The following property is etc. Attach a separate list | | year. If personal p | property is being leased, in | ndicate the type, make, model, serial number, | | |
| PROPERTY TYPE (REAL OR PERSONAL) | | PROPERTY DESCRIPTION | | | | |
| (NEXTERNATE) | | | | | | |
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| | | 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 | | | |
| | r penalty of perjury under the loompanying statements or doc | | | oing and all information hereon, including any y knowledge and belief. | | |
| SIGNATURE OF PERSON MAKING | CLAIM | | | DATE | | |
| NAME OF PERSON MAKING CLAIM | | | | TITLE | | |
| EMAIL ADDRESS | | | | DAYTIME TELEPHONE | | |
| LIVIALADDINESS | | | | / | | |

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