EF-263-B-R02-0810-27000472-1 BOE-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 address)



## **Xochitl Marina Camacho Monterey County Assessor**

P. O. Box 570 Salinas, CA 93902-0570 Phone: (831) 755-5035 Fax: (831) 755-5435 assessor@co.monterey.ca.us

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L		To receive the full exemption, this claim must	
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		ASSESS	SOR'S PARCEL NUMBER
USE OF PROPERTY Check and state the	primary and incidental qualifying uses of the p	property.	
The exemption claim is made for the following p	roperty: (if there are numerous properties, pa property and the name and address		that clearly identifies the
PROPERTY TYPE	PRIMARY USE		INCIDENTAL USE
Land			
☐ Buildings and Improvements			
Personal Property			
Yes No Does the lease/agreement con	fer upon the lessee the exclusive right to poss	ession and use o	of the property?
	rator of real or personal property owned by a p f California that is used exclusively for commu es?		
Note: If requested by the assessor, the claiman	t shall provide a copy of the lease or agreeme	nt.	
	CERTIFICATION		
I certify (or declare) under penalty of perjury und accompanying statements	der the laws of the State of California that the s s or documents, is true and correct to the best		
SIGNATURE OF PERSON MAKING CLAIM		DATE	
NAME OF PERSON MAKING CLAIM		TITLE	
E-MAIL ADDRESS		DAYTIME	E TELEPHONE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

