EF-270-AH-R05-0810-29000528-1 BOE-270-AH REV. 05 (08-10)

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

To receive the full exemption, a claimant must complete and file this form with the Assessor by February 15.



Rolf D. Kleinhans Nevada County Assessor

950 Maidu Avenue P.O. Box 599002 Nevada City, CA 95959-7902 Telephone (530) 265-1232 Fax (530) 265-9858 assessor@nevadacountyca.gov

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STATE,	, ZIP CODE)				
ADDRESS OF EXHIBITION (STRE	ET, BOOTH, ETC.; BE SPECIFIC)				
	LIST ALL PERSONAL P	ROPERTY FOR WHICH E	XEMPTION IS CLAIMED		
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.					
2.					
3.					
4.					
5.					
I hereby state that:					
state; (b) I intend to rer (c) The property	move the property from the state is subject to taxation in some of country have been paid.	following its use or exhi	ibition here;		
		1	Whom should we contact d		
FOR A	ASSESSOR'S USE ONLY	NAME			
		ADDRESS (STRE	ADDRESS (STREET, CITY, STATE, ZIP CODE)		
Received by	(Assessor's designee)				
of	(county or city)	DAYTIME PHONE	E NUMBER		
on	n(date)		E-MAIL ADDRESS		
		CERTIFICATION			
	under penalty of perjury under the perpart of the companying statements or documents or documents.				
SIGNATURE OF PERSON MAKING CLAIM		TITLE		DATE	

