EF-263-A-R07-0617-31000145-1 BOE-263-A (P1) REV. 07 (06-17)

QUALIFIED LESSORS' EXEMPTION CLAIM

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)



Matthew R. Maynard Placer County Assessor

2980 Richardson Drive Auburn, CA 95603-2640 Phone: (530) 889-4300

Email: assessor@placer.ca.gov Website: www.placer.ca.gov/assessor

To receive one time reporting treatment for the exemption, this claim must be filed with the Assessor within 120 days of the commencement date of the lease.

L	_ commencement date of the lease.			
DENTIFICATION OF APPLICANT				
LESSOR'S CORPORATE OR ORGANIZATION NAME				
MAILING ADDRESS				
CITY, STATE, ZIP CODE				
CORPORATE ID (IF ANY)				
DENTIFICATION OF PROPERTY				
ADDRESS OF PROPERTY (NUMBER AND STREET)		FISCAL YEAR OF CLAIM 20 - 20		
CITY, COUNTY, ZIP CODE		ASSESSOR'S PARC	CEL NUMBER	
USE OF PROPERTY ✓ Check and state the	nrimary and incidental qualifying uses of the pro	nerty		
The exemption claim is made for the following pi			ly identifies the	
The exemption stating in made to take to following pr	property and the name and address of		iy raonanee are	
PROPERTY TYPE	PRIMARY USE	INCIDENT	INCIDENTAL USE	
☐ Land				
☐ Buildings and Improvements				
☐ Personal Property				
Yes No The lease confers upon the less	see the exclusive right to possession and use of	the property.		
	stitution is one whose property qualifies for the e, state university, University of California, or no			
Yes No The lessee institution has the o	ption at the end of the lease term of acquiring tal sum.	he above property descr	ibed in the lease for \$1	
Important: A lessee's affidavit, in which the lesse will result in denial of one time reporting treatme			ete the lessee's affidavit	
	CERTIFICATION			
I certify (or declare) under penalty of perjury und accompanying statements	ler the laws of the State of California that the for or documents, is true and correct to the best of			
SIGNATURE OF PERSON MAKING CLAIM		DATE		
NAME OF PERSON MAKING CLAIM		TITLE		
EMAIL ADDRESS		DAYTIME TELEPHON	E	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



RETURN THIS AFFIDAVIT TO **LESSOR**

AFFIDAVIT FOR EXECUTION BY QUALIFYING INSTITUTIONAL LESSEE

NAME OF QUALIFYING LESSEE INSTITUTION			
MAILING ADDRESS			
CITY, STATE, ZIP CODE			
$\sqrt{}$ Check the type of qualifying use of th	ne property		
☐ FREE PUBLIC LIBRARY	☐ COMMUNITY COLLEGE	UNIVERSITY OF CALIFORNIA	
☐ FREE MUSEUM	☐ STATE COLLEGE	☐ NONPROFIT COLLEGE	
☐ PUBLIC SCHOOL	☐ STATE UNIVERSITY		
AME OF LESSOR			
AILING ADDRESS			
ITY, STATE, ZIP CODE			
OMMENCEMENT DATE OF LEASE	DATE PROPERTY PUT	DATE PROPERTY PUT TO EXEMPT USE	
	PLEASE ATTACH A COPY OF THE LEASE AGRE	EMENIT	
	PLEASE ATTACH A COPT OF THE LEASE AGRE	ELIVIEINI	
Yes No The lessee institution hat (one dollar) or any other	as the option at the end of the lease term of acquiring nominal sum.	the above property described in the lease for \$1	
	CERTIFICATION		
	iury under the laws of the State of California that the forements or documents, is true and correct to the best		
GNATURE OF PERSON MAKING CLAIM		DATE	
AME OF PERSON MAKING CLAIM		TITLE	
MAIL ADDRESS		DAYTIME TELEPHONE	
LWALADDILOO		()	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

