EF-263-A-R07-0617-33000266-1 BOE-263-A (P1) REV. 07 (06-17) QUALIFIED LESSORS' EXEMPTION CLA PROPERTY USED FOR FREE PUBLIC LIBF MUSEUMS AND USED EXCLUSIVELY FOR I COMMUNITY COLLEGES, STATE COLLEGES, ST UNIVERSITY OF CALIFORNIA, AND NONP	ARIES AND FREE PUBLIC SCHOOLS, ATEUNIVERSITIES,	As:	ter Aldana sessor-County C nty of Riverside Box 751 erside, CA 92502-0751 ne: (951) 413-2890 v.rivcoacr.org		
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and	d mailing address)				
L	L	for the exempt with the Asses	e time reporting ion, this claim mu ssor within 120 d It date of the lease	ist be filed ays of the	
IDENTIFICATION OF APPLICANT					
LESSOR'S CORPORATE OR ORGANIZATION NAME					
MAILING ADDRESS					
CITY, STATE, ZIP CODE					
CORPORATE ID (IF ANY)					
IDENTIFICATION OF PROPERTY					
ADDRESS OF PROPERTY (NUMBER AND STREET)				FISCAL YEAR OF CLAIM	
CITY, COUNTY, ZIP CODE			ASSESSOR'S PARCE		
USE OF PROPERTY Check and state the	e primary and incidental qualifyi	na uses of the propert	V		
The exemption claim is made for the following	property: (if there are numerou		ttach a list that clearly	∕ identifies the	
PROPERTY TYPE	PRIMARY US		INCIDENT	AL LISE	
Land				-	
Buildings and Improvements					
Personal Property					
☐ Yes ☐ No The lease confers upon the lessee the exclusive right to possession and use of the property.					
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 (one dollar) or any other nominal sum.					
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					

accompanying statements or documents, is true and correct to the best of my knowledge and belief.				
SIGNATURE OF PERSON MAKING CLAIM	DATE			
NAME OF PERSON MAKING CLAIM	TITLE			
EMAIL ADDRESS	DAYTIME TELEPHONE ()			

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

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					
$\boxed{\checkmark}$ Check the type of qualifying use of the pro	perty				
FREE PUBLIC LIBRARY		UNIVERSITY OF CALIFORNIA			
FREE MUSEUM	STATE COLLEGE	NONPROFIT COLLEGE			
PUBLIC SCHOOL	STATE UNIVERSITY				
NAME OF LESSOR					
MAILING ADDRESS					
CITY, STATE, ZIP CODE					
COMMENCEMENT DATE OF LEASE	DATE PROPERTY PUT	TO EXEMPT USE			
PLEA	ASE ATTACH A COPY OF THE LEASE AGREI	EMENT			

The following property is leased as of January 1 of this year. If personal property is being leased, indicate the type, make, model, serial number, etc. Attach a separate listing if necessary.

PROPERTY TYPE (REAL OR PERSONAL)	PROPERTY DESCRIPTION
	•

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 (one dollar) or any other nominal sum.

CERTIFICATION 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.				
NAME OF PERSON MAKING CLAIM	TITLE			
EMAIL ADDRESS	DAYTIME TELEPHONE			
	()			
THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION				

