EF-502-P-R03-0516-51000624-1 BOE-502-P (P1) REV. 03 (05-16)

POSSESSORY INTERESTS ANNUAL USAGE REPORT



KATHY SCRIVEN SUTTER COUNTY ASSESSOR

1190 Civic Center Blvd. Yuba City, CA 95993

Phone: (530) 822-7160 Fax: (530) 822-7198

www.suttercounty.org/assessor E-mail: assessor@co.sutter.ca.us

NAME AND MAILING ADDRESS	
(Make necessary corrections to the printed name and mailing address)	
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or more taxable po- information identifyir rise to the taxable p	ssessory interests have b ng the holders of a taxable possessory interests. If you	peen created or e possessory inte ur agency owns ar	renewed erest, the ny prope	cal governmental entity that is the fee owner of real property in which one of to provide the assessor of the county in which the property is located to property involved, and the terms and conditions of the agreement giving the taxable possessory interests, you are required to complete and file this prests occurring in the prior year even if they ended in the prior year.			
	TAXABLE POSSESSORY I			TY OWNED BY THIS AGENCY, CHECK HERE, AND SIGN, DATE,			
		PF	ROPER	RTY USAGE			
NAME OF TENANT/LESSEE/PERMITTEE			MAILING ADDRESS				
LOCATION/DESCRIPTION OF SUBJECT PROPERTY			DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED				
TYPE OF TRANSACTION (check one) CREATION RENEWAL SUBLEASE ASSIGNMENT			AMOUNT AND TYPE OF CONSIDERATION (i.e. gross, full service, NNN, other)				
TERM OF POSSESSORY INTEREST (including renewal or extension options)			AGENCY PAID EXPENSES (if any, enter dollar amount)				
SUBLEASE	ORIGINAL TERM	REMAINING TERM	1	CONSIDERATION PAID FOR MASTER LEASE			
ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	1	CONSIDERATION PAID FOR UNDERLYING LEASE			
NAME OF TENANT/LESSEE/PERMITTEE			MAILING ADDRESS				
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TERM OF POSSESSORY INTEREST (including renewal or extension options)			AGENCY PAID EXPENSES (if any, enter dollar amount)				
SUBLEASE	ORIGINAL TERM	REMAINING TERM	1	CONSIDERATION PAID FOR MASTER LEASE			
ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	1	CONSIDERATION PAID FOR UNDERLYING LEASE			
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THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



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		PI	ROPEF	RTY USAGE		
NAME OF TENANT/LESSEE/PERMITTEE			MAILING ADDRESS			
LOCATION/DESCRIPTION OF SUBJECT PROPERTY			DATE O	DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED		
TYPE OF TRANSACTION (check one)			AMOUNT AND TYPE OF CONSIDERATION (i.e. gross, full service, NNN, other)			
	RENEWAL SUBLEASE	ASSIGNMENT				
TERM OF POSSESSORY INTEREST (including renewal or extension options)		AGENCY PAID EXPENSES (if any, enter dollar amount)				
SUBLEASE	ORIGINAL TERM	REMAINING TERM	М	CONSIDERATION PAID FOR MA	ASTER LEASE	
ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	CONSIDERATION PAID FOR UNDERLYING LEASE			
NAME OF TENANT/LESSEE/PERMITTEE			MAILING ADDRESS			
LOCATION/DESCRIPTION OF SUBJECT PROPERTY			DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED			
TYPE OF TRANSACTION (check one) CREATION RENEWAL SUBLEASE ASSIGNMENT			AMOUNT AND TYPE OF CONSIDERATION (i.e. gross, full service, NNN, other)			
TERM OF POSSESSORY INTEREST (including renewal or extension options)			AGENC'	AGENCY PAID EXPENSES (if any, enter dollar amount)		
SUBLEASE	ORIGINAL TERM	REMAINING TERM	M	CONSIDERATION PAID FOR MA	ASTER LEASE	
ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	M	CONSIDERATION PAID FOR UN	NDERLYING LEASE	
NAME OF TENANT/LES	SSEE/PERMITTEE		MAILING	G ADDRESS		
LOCATION/DESCRIPT	ION OF SUBJECT PROPERTY	•	DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED			
TYPE OF TRANSACTION (check one) CREATION RENEWAL SUBLEASE ASSIGNMENT			AMOUNT AND TYPE OF CONSIDERATION (i.e. gross, full service, NNN, other)			
TERM OF POSSESSORY INTEREST (including renewal or extension options)			AGENCY PAID EXPENSES (if any, enter dollar amount)			
SUBLEASE	ORIGINAL TERM	REMAINING TERM		CONSIDERATION PAID FOR MA	ASTER LEASE	
ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM		CONSIDERATION PAID FOR UN	NDERLYING LEASE	
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			CEI	RTIFICATION		
of my knowledge a statement. If prepa	and belief it is true, correctived by a duly authorized	ct, and complete	and co	overs any property required	ements or other attachments, and to the best I to be reported by the agency named in the on declaration is based on all the information	
of which the preparer has knowledge. SIGNATURE OF AGENCY REPRESENTATIVE/PREPARER					DATE	
NAME OF AGENCY REPRESENTATIVE					TITLE	
NAME OF PREPARER					TITLE	
PREPARER'S EMAIL ADDRESS					DAYTIME TELEPHONE NUMBER	

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