EF-263-A-R07-0617-53000153-1 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)



Shanna White County Clerk-Recorder-Assessor

P.O. Box 1255 Weaverville, CA 96093 Phone: (530) 623-1257 Fax: (530) 623-8398 assessor@trinitycounty.org

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			with the Assessor within 120 days of the commencement date of the lease.			
ENTIFICATION O	F APPLICANT					
LESSOR'S CORPO	ORATE OR ORGANIZATION NAME					
MAILING ADDRES	SS					
CITY, STATE, ZIP	CODE					
CORPORATE ID (I	F ANY)					
NTIFICATION O	F PROPERTY					
ADDRESS OF PR		FISCAL YEAR OF CLAIM 20 - 20				
CITY, COUNTY, ZI	ASSESSOR'S PARC	ASSESSOR'S PARCEL NUMBER				
		primary and incidental qualifying uses of the pro operty: (if there are numerous properties, plea property and the name and address of	ase attach a list that clearl	y identifies the		
	PROPERTY TYPE	PRIMARY USE	INCIDENTAL USE			
Land						
Buildings	s and Improvements					
Persona	l Property					
☐ Yes ☐ No	☐ 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.					
		ee attests to the above statement(s) is provided. nt for the exemption. A separate affidavit is requ		te the lessee's affidavit		
		CERTIFICATION				
I certify (or deci		er the laws of the State of California that the for or documents, is true and correct to the best of				
SIGNATURE OF PER	SON MAKING CLAIM		DATE			
NAME OF PERSON N	MAKING CLAIM		TITLE			
EMAIL ADDRESS			DAYTIME TELEPHONE	<u> </u>		

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



RETURN THIS AFFIDAVIT TO LESSOR

AFFIDAVIT FOR EXECUTION BY QUALIFYING INSTITUTIONAL LESSEE							
NAME OF QUALIFYING LESS	EE INSTITUTION						
MAILING ADDRESS							
CITY, STATE, ZIP CODE							
✓ Check the type of qua	alifying use of the property						
☐ FREE PUBLIC LIBRARY ☐ COMMUNI			Y COLLEGE	UNIVERSITY OF CALIFORNIA			
☐ FREE MUSEUM ☐		☐ STATE COL	LEGE	☐ NONPROFIT COLLEGE			
☐ PUBLIC SCHOOL ☐ S		STATE UNI	☐ STATE UNIVERSITY				
NAME OF LESSOR							
MAILING ADDRESS							
CITY, STATE, ZIP CODE							
COMMENCEMENT DATE OF LEASE			DATE PROPERTY PUT TO EXEMPT USE				
	ΡΙ ΕΔΩΕ ΔΤΤ		 F THE LEASE AGREEM	ENT .			
	I LLAGE ATT	ACITA COL I OI	THE LEASE AGNEEM	LIVI			
The following property is etc. Attach a separate list		year. If personal p	property is being leased, in	ndicate the type, make, model, serial number,			
PROPERTY TYPE (REAL OR PERSONAL)							
(NEXTERNATE)							
		4 4la a a a a a 4 4la a 1 a		shows are and described in the lease for MA			
	ar) or any other nominal sum.	t the end of the le	ease term of acquiring the	above property described in the lease for \$1			
		CERTIFIC	CATION				
	r penalty of perjury under the loompanying statements or doc			oing and all information hereon, including any y knowledge and belief.			
SIGNATURE OF PERSON MAKING	CLAIM			DATE			
NAME OF PERSON MAKING CLAI	M			TITLE			
EMAIL ADDRESS				DAYTIME TELEPHONE			
LIMALADDILLOG			/				

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

