EF-263-A-R06-0612-39000385-1 BOE-263-A (P1) REV. 06 (06-12)

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)



Steve J. Bestolarides Assessor-Recorder-County Clerk

San Joaquin County 44 N San Joaquin Street Suite 230 Stockton, CA 95202-3273 Exemption Section: (209) 468-2647 www.sjgov.org/assessor_recorder

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 PARCEL NUMBER
USE OF PROPERTY Check and state the primary and incidental qualifying	
The exemption claim is made for the following property: (if there are numerous property and the name	s prop <mark>erti</mark> es, please attach a list that clearly identifies the e and address of the lessee)
PROPERTY TYPE PRIMARY USE	INCIDENTAL USE
☐ Land	V
☐ Buildings and Improvements	
Personal Property	
☐ Yes ☐ No The lease confers upon the lessee the exclusive right to posse	ssion and use of the property.
Yes No As used herein a qualifying institution is one whose property community college, state college, state university, University of	qualifies for the free public library, free museum, public school, California, or nonprofit college property tax exemption.
Yes No The lessee institution has the option at the end of the lease te (one dollar) or any other nominal sum.	erm of acquiring the above property described in the lease for \$1
Important: A lessee's affidavit, in which the lessee attests to the above stateme will result in denial of one time reporting treatment for the exemption. A separate	nt(s) is provided. Failure to submit/complete the lessee's affidavit a affidavit is required of each lessee.
CERTIFICATIO	ON
I certify (or declare) under penalty of perjury under the laws of the State of Calif accompanying statements or documents, is true and corre	
SIGNATURE OF PERSON MAKING CLAIM	DATE
NAME OF PERSON MAKING CLAIM	TITLE
EMAIL ADDRESS	DAYTIME TELEPHONE ()

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



RETURN THIS AFFIDAVIT TO LESSOR

AFFIDAVIT FOR EXECUTION BY QUALIFYING INSTITUTIONAL LESSEE

NAME OF QUALIFYING LESSEE INSTITUTION	R EXECUTION BY QUALIFYING INSTITU	STIONAL LEGGLE	
MAILING ADDRESS			
CITY, STATE, ZIP CODE			
✓ Check the type of qualifying use of the present	roperty		
FREE PUBLIC LIBRARY	☐ COMMUNITY COLLEGE	UNIVERSITY OF CALIFORNIA	
☐ FREE MUSEUM	☐ STATE COLLEGE	☐ NONPROFIT COLLEGE	
☐ PUBLIC SCHOOL	STATE UNIVERSITY		
NAME OF LESSOR			
MAILING ADDRESS			
CITY, STATE, ZIP CODE			
DATE LEASE SIGNED		COMMENCEMENT DATE OF LEASE	
THE ASSESSOR MAY REQUEST A COPY OF THE LEASE AGREEMENT 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			
	USE		
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.			
SIGNATURE OF PERSON MAKING CLAIM DATE			
NAME OF PERSON MAKING CLAIM		TITLE	
EMAIL ADDRESS		DAYTIME TELEPHONE ()	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

