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ANNUAL USAG	EREPORT			Founded 1850	West Sacramento (916) Fax (530) 666-8213 assessor@yolocounty.or			
	MAILING ADDRESS ssary corrections to the printed name	e and mailing address)		Г				
or more taxable po information identifyin rise to the taxable p form with the Assess IF THERE ARE NO	ssessory interests have l ng t <mark>he holders of</mark> a taxabl possessory interests. If yo or by <b>February 15</b> . Report	been created or e possessory inte ur agency owns ar all taxable posses NTERESTS ON F SHOWN ABOVE.	renewed erest, the ny prope sory inte ROPER	to provide the as property involved, rty with taxable poss rests occurring in the TY OWNED BY THI	tity that is the fee owner of resessor of the county in which, and the terms and conditions essory interests, you are required e prior year even if they ended is AGENCY, CHECK HERE	the property is located of the agreement giving to complete and file this the prior year.		
NAME OF TENANT/LESSEE/PERMITTEE				MAILING ADDRESS				
LOCATION/DESCRIPTION OF SUBJECT PROPERTY				DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED				
	DN (check one) ENEWAL SUBLEASE RY INTEREST (including renewal	ASSIGNMENT		TAND TYPE OF CONS	IDERATION (i.e. gross, full service, NNi ny, enter dollar amount)	V, other)		
SUBLEASE	ORIGINAL TERM	REMAINING TERM	1	CONSIDERATION PA	ID FOR MASTER LEASE			
ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	1	CONSIDERATION PA	ID FOR UNDERLYING LEASE			
NAME OF TENANT/LES	SSEE/PERMITTEE		MAILING	ADDRESS				
LOCATION/DESCRIPTION OF SUBJECT PROPERTY				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)				
TERM OF POSSESSOF	RY INTEREST (including renewal	or extension options)	AGENCI	Y PAID EXPENSES (if a	ny, enter dollar amount)			
SUBLEASE	ORIGINAL TERM	REMAINING TERM	1	CONSIDERATION PA	ID FOR MASTER LEASE			
ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	1	CONSIDERATION PA	ID FOR UNDERLYING LEASE			
NAME OF TENANT/LES	SSEE/PERMITTEE		MAILING	ADDRESS				
LOCATION/DESCRIPTION OF SUBJECT PROPERTY				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)				
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 PA	ID FOR UNDERLYING LEASE			

**POSSESSORY INTERESTS** 

ANNUAL USAGE REPORT

## YOLO COUNTY COUNTY ASSESSOR

Woodland/Davis (530) 666-8135

625 Court St, Rm. 104

Woodland, CA 95695

PROPERTY 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)				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	M	CONSIDERATION PAID FOR MASTER LEASE				
ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	N	CONSIDERATION PAID FOR UNDERLYING LEASE				
NAME OF TENANT/LES	SSEE/PERMITTEE		MAILING	ADDRESS				
LOCATION/DESCRIPTI	ON OF SUBJECT PROPERTY		DATE O	F TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED				
	DN (check <mark>on</mark> e) RENEWAL SUBLEASE		AMOUN	TAND TYPE OF CONSIDERATION (i.e. gross, full service, NNN, other)				
TERM OF POSSESSOF	RY INTEREST (including renewal	or extension options)	AGENC	Y PAID EXPENSES (if any, enter dollar amount)				
SUBLEASE	ORIGINAL TERM	REMAINING TERM	И	CONSIDERATION PAID FOR MASTER LEASE				
ASSIGNMENTS	ORIGINAL TERM	REMAINING TER	И	CONSIDERATION PAID FOR UNDERLYING LEASE				
NAME OF TENANT/LES				GADDRESS				
NAME OF TENANT/EE	SSEL/FERMITTEE		WALLING					
LOCATION/DESCRIPTI	ON OF SUBJECT PROPERTY		DATE O	F TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED				
	DN (check one)		AMOUN	T AND TYPE OF CONSIDERATION (i.e. gross, full service, NNN, other)				
TERM OF POSSESSOF	RY INTERE <mark>ST</mark> (including renewal)	or extension options)	AGENC	Y PAID EXPENSES (if any, enter dollar amount)				
SUBLEASE	ORIGINAL TERM		M	CONSIDERATION PAID FOR MASTER LEASE				
ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	N	CONSIDERATION PAID FOR UNDERLYING LEASE				
		U						
CERTIFICATION								

I certify (or declare) that I have examined this report, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and covers any property required to be reported by the agency named in the statement. If prepared by a duly authorized person other than an agency official, the certification 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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