

**STATEMENT OF LAND CHANGES**

ASSEESSEE'S NAME	LIEN DATE (year)	COUNTY NAME	SBE NO.
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**Name, address, and telephone number of person to whom correspondence regarding the Statement of Land Changes should be addressed:**

NAME	ADDRESS (street, city, state, zip code)	EMAIL ADDRESS	TELEPHONE NO. (    )
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*This year's Property Statement differs from last year's with respect to the following land map and parcel(s). (Use a separate sheet for each land map, except in cases of reparcelling.)*

OMITTED THIS YEAR				REPORTED FIRST TIME THIS YEAR				QUALIFIED PROPERTY*
<input type="checkbox"/> Sale	<input type="checkbox"/> Lease	<input type="checkbox"/> Reparcelling	<input type="checkbox"/> Other (remarks)	<input type="checkbox"/> Purchase	<input type="checkbox"/> Lease	<input type="checkbox"/> Reparcelling	<input type="checkbox"/> Other (remarks)	
TAX-RATE AREA	MAP	PARCEL	SIZE (AC. OR SQ. FT.)	TAX-RATE AREA	MAP	PARCEL	SIZE (AC. OR SQ. FT.)	
								<input type="checkbox"/>
								<input type="checkbox"/>
								<input type="checkbox"/>
								<input type="checkbox"/>

\*Check Box for qualified electric utility property as described in Revenue and Taxation (R&T) code section 100.95 (see publication 67GE for specific instructions), or for railroad qualified property as described in R&T code section 100.11 (see publication 67RR for specific instructions).

<b>Following data to be supplied for each transaction</b>	<b>Following data to be supplied for leased property being leased from another entity and reported for the first time or for lease renewal</b>	
GRANTOR, GRANTEE, LESSOR, LESSEE (circle one)	DATE OF LEASE <input type="checkbox"/> New <input type="checkbox"/> Renewal	DATE OF TERMINATION
ADDRESS (street, city, state, zip code)	RENEWAL OPTIONS	
INSTRUMENT	DATE	PROPERTY TAXES TO BE PAID BY
RECORDING REFERENCE	RECORDING DATE	<input type="checkbox"/> Lessor
IMPROVEMENTS AT TIME OF PURCHASE CONSIST OF		<input type="checkbox"/> Lessee
PURCHASE PRICE \$	SALE PRICE \$	MONTHLY/ANNUAL RENTAL AT START OF LEASE \$
CURRENT RENTAL \$	EFFECTIVE DATE	COUNTY ASSESSOR'S PARCEL NO. OF SUBJECT PROPERTY
SUBJECT PROPERTY ADDRESS (street, city, state, zip code)		RENTAL INCREASE BY YEAR/TERM (including all renewals)
REMARKS		PREPARER'S NAME (please print)
		PREPARER'S SIGNATURE
		DATE

**FOR OFFICIAL USE ONLY**

Escape Year: \_\_\_\_\_

Property State Assessed  Yes  No

Appraiser Name: \_\_\_\_\_

Date Completed: \_\_\_\_\_