LESSEES’ EXEMPTION CLAIM
Declaration of property information as of 12:01 a.m., January 1, 20__.

PROPERTY USED EXCLUSIVELY FOR PUBLIC SCHOOLS, COMMUNITY COLLEGES, STATE COLLEGES, STATE UNIVERSITIES, OR UNIVERSITY OF CALIFORNIA

NAME AND MAILING ADDRESS
(Make necessary corrections to the printed name and mailing address)

To receive the full exemption, this claim must be filed with the Assessor by February 15.

IDENTIFICATION OF APPLICANT
LESSEE’S CORPORATE OR ORGANIZATION NAME
MAILING ADDRESS
CITY, STATE, ZIP CODE
CORPORATE ID (IF ANY)

IDENTIFICATION OF PROPERTY
ADDRESS OF PROPERTY (NUMBER AND STREET)
CITY, COUNTY, ZIP CODE ASSESSOR’S PARCEL NUMBER

USE OF PROPERTY Check and state the primary and incidental qualifying uses of the property.
The exemption claim is made for the following property: (If there are numerous properties, please attach a list that clearly identifies the property and the name and address of the lessee)

PROPERTY TYPE PRIMARY USE INCIDENTAL USE
☐ Land
☐ Buildings and Improvements
☐ Personal Property

☐ Yes ☐ No Does the lease/agreement confer upon the lessee the exclusive right to possession and use of the property?

☐ Yes ☐ No Is the claimant a lessee or operator of real or personal property owned by a public school, community college, state college, state university, or University of California that is used exclusively for community college, state college, state university, or University of California purposes?

Note: If requested by the assessor, the claimant shall provide a copy of the lease or agreement.

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

NAME OF PERSON MAKING CLAIM

E-MAIL ADDRESS
DAYTIME TELEPHONE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION