EF-502-P-R03-0516-24000309-1 BOE-502-P (P1) REV. 03 (05-16)

## POSSESSORY INTERESTS ANNUAL USAGE REPORT



## MERCED COUNTY MATT H. MAY, ASSESSOR

2222 M STREET
MERCED, CA 95340
TELEPHONE (209) 385-7631
FAX (209) 725-3956
www.co.merced.ca.us\assessor

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

L								
				al governmental entity that is the fee owner of real property in which one				
				I to provide the assessor of the county in which the property is located property involved, and the terms and conditions of the agreement giving				
				rty with taxable possessory interests, you are required to complete and file this				
				erests occurring in the prior year even if they ended in the prior year.				
IF THERE ARE NO T	AXABLE POSSESSORY I	NTERESTS ON F	ROPER	TY OWNED BY THIS AGENCY, CHECK HERE, AND SIGN, DATE,				
	FORM TO THE ADDRESS							
				RTY USAGE				
NAME OF TENANT/LESSEE/PERMITTEE				MAILING ADDRESS				
NAIVIE OF TENANT/LESSEE/FERWITTEE				WILLING ABBILEGO				
CONTION/DESCRIPTION OF SUBJECT PROPERTY				DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED				
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ASSIGNMENTS								
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NAME OF TENANT/LESSEE/PERMITTEE				MAILING ADDRESS				
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TYPE OF TRANSACTION (check one)			AMOUNT AND TYPE OF CONSIDERATION (i.e. gross, full service, NNN, other)					
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THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



EF-502-P-R03-0516-2400030

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)  CREATION RENEWAL SUBLEASE ASSIGNMENT				AMOUNT AND TYPE OF CONSIDERATION (i.e. gross, full service, NNN, other)					
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ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	Л	CONSIDERATION PAID FOR UNDERLYING LEASE					
NAME OF TENANT/LESSEE/PERMITTEE MAILING ADDRESS									
LOCATION/DESCRIPTION OF SUBJECT PROPERTY  DATE OF TRANSACTION IN WHICH A TAXABLE POSSESSORY INTEREST WAS ACQUIRED									
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TERM OF POSSESSORY INTEREST (including renewal or extension options)  AGENCY PAID EXPENSES (if any, enter dollar amount)									
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ASSIGNMENTS	ORIGINAL TERM	REMAINING TERM	1	CONSIDERATION PAID FOR UN	NDERLYING LEASE				
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CERTIFICATION									
of my knowledge a	ind belief it is true, correct red by a duly authorized	ct, and complete	and co	overs any property required	ments or other attachments, and to the best to be reported by the agency named in the on declaration is based on all the information				
SIGNATURE OF AGEN	CY REPRESENTATIVE/PREPA		DATE						
NAME OF AGENCY RE	PRESENTATIVE		TITLE						
NAME OF PREPARER			TITLE						
PREPARER'S EMAIL AI	DDRESS		DAYTIME TELEPHONE NUMBER ( )						

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

