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REQUEST FOR PARCEL TAX EXEMPTION

An exemption from the San Rafael Elementary and/or High School Parcel Tax assessment will be made available to homeowners who are 65 years of age, or homeowners receiving Disability Supplemental Security Income. Eligibility is defined as the owner-occupant who owns the parcel and uses that parcel as their principal place of residence.

The completed application from a qualified applicant will provide an exemption for the parcel tax for the remaining term of the assessment so long as such applicant continues to use the parcel as their principal residence. Exemption status will be effective 30 days within receipt of the application. The District will not refund or credit paid parcel taxes prior to receipt of the application.

PROPERTY AND HOMEOWNER INFORMATION

Assessor's Parcel Number (APN) _____

Owner Name/s _____

Date of Birth/s _____

Street Address _____ Zip Code _____

Telephone _____ Email _____

PROOF OF SENIOR ELIGIBILITY (COPIES MUST BE INCLUDED WITH THE APPLICATION)

- 1. **Property Tax Bill**-- Your most recent bill indicating your ownership of the property.
- 2. **Occupancy** - A COPY of your most recent PG&E bill INCLUDE THE PAYMENT STUB
- 3. **Valid California Driver's License** or California Identification Card

PROOF OF DISABILITY SECURITY (COPIES MUST BE INCLUDED WITH THE APPLICATION)

- 1. **Property Tax Bill**-- Your most recent bill indicating your ownership
- 2. **Occupancy** - A COPY of your most recent PG&E bill INCLUDE THE PAYMENT STUB
- 3. **Valid California Driver License** or Identification Card
- 4. **Disability Supplemental Security Income** - Must include a SSDI letter dated within the last 45 days

SIGNATURE/s REQUIRED

Completed _____, _____, 20____ in _____, California

I declare under penalty of perjury the foregoing is true and correct.

Signature: _____

Owner

Owner

Please complete and return this form with the applicable paper-work:

San Rafael City Schools

Attn: Emily Busch

310 Nova Albion Way, San Rafael, CA 94903

Approved _____ Both HSD ESD

Date sent to Assessors Office _____

Denied _____