



OFFICE OF  
**ASSESSOR-COUNTY CLERK-  
 RECORDER & ELECTIONS**  
 COUNTY OF SAN MATEO

**MARK CHURCH**  
 ASSESSOR-COUNTY CLERK-  
 RECORDER & CHIEF ELECTIONS OFFICER

**Property Use Report**

*This is not a claim form. Filing a Property Use Report alone will not make a property eligible for exemption.  
 Property Use Reports should be filed along with any other form(s) necessary to make property eligible for exemption.*

If your organization was **not** the only user of this property since January 1 of the prior year, you **must** complete this form. If the property was offered for use for special events since January 1 of the prior year, you **must** complete this form.

**Please note:** If there is a telephone cell tower or antenna on the property, please indicate and include a copy of the lease.

**Please check this box, if the property was used exclusively by your organization since January 1 of the prior year.**

Name of claiming assessor's organization: \_\_\_\_\_

Parcel No: \_\_\_\_\_

Name(s) of person(s) or organization(s) using property since January 1 of prior year. <b>*Attach copies of any leases</b>	Size of area used. (Sq. Ft.)	Description of area being used.	Types of activities (e.g., meetings, counseling, training, fundraising, weddings, etc.).	# of days used in prior year.	Was property used more than once a week?	Fee paid for use of the property.
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	

*I certify under penalty of perjury under the laws of the State of California that all information hereon is true, correct, and complete to the best of my knowledge and belief.*

Signature of Person Making Claim \_\_\_\_\_ Title \_\_\_\_\_

Printed Name of Person Making Claim \_\_\_\_\_ Telephone No. \_\_\_\_\_ Date \_\_\_\_\_

***If you have questions, please call the Assessor's Division at 650.363.4500 or e-mail at [institutionalexemptions@smcacre.org](mailto:institutionalexemptions@smcacre.org). Thank you!***

555 County Center, Redwood City, CA 94063

**P 650.363.4500 F 650.363.1903 email [assessor@smcacre.org](mailto:assessor@smcacre.org) web [www.smcacre.org](http://www.smcacre.org)**