100 Shaw Drive, San Anselmo, CA 94960 | Phone: 415.454.2162 | Fax: 415.454.6840 | www.rossvalleyschools.org

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SENIOR CITIZEN PARCEL TAX EXEMPTION APPLICATION

Applications MUST be submitted no later than August 1st of the current tax year

You must meet <u>ALL</u> of the following criteria to qualify for a parcel tax exemption during any tax year:

• you must have attained age 65 prior to July 1 of any applicable year.

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- you must be the owner or a beneficial owner* of the parcel.
- you must use the parcel as your principal place of residence.

If you believe you will qualify for this exemption, please complete all items below and return this form along <u>with a copy</u> of your current driver license or California ID card as proof of age and primary residency. If current ID does not have the address of the parcel you are requesting exemption for, please submit a copy of a utility bill dated within the last month that details your name and the physical address of the property (PG&E or Marin Municipal Water Dist) by mail to:

> Ross Valley School District Attn: Senior Exemption 100 Shaw Drive San Anselmo, CA 94960

If you have questions, or need assistance in completing this form, please call (415) 451-4070. The exemption shall continue and remain in effect for each year without the need for annual reapplication.

Name:		
Address:		
Phone:	Email:	
Is the address your principal place	ce of residence? 🛛 YES 🖓 NO	
Birth Date:	Parcel Number:	
Do you claim the exemption as:	a) ☐ Owner of record b) ☐ A beneficial owner* under a trust instrume c) ☐ Other	nt
	a copy of the following pages: First Page, Signature Page and he parcel number, lot numbers for your property, or the prop	
	at (city)	, California. I
declare under penalty of perjury the		
	Signature:	
*"Beneficial Owner" means that you have title in y behalf, such as a partner, corporation, lessor, oblig	our name, or title may be held for your benefit by a trustee or other gee under a contract of sale, etc.	fiduciary who acts on your
	Date Property Owner Notified	
	Reason if Denied:	
	Chool District Authorized Signature:	