

## **APPLICATION FOR EXEMPTION FROM SCHOOL FEES**

Levied Under Education Code Section 17620

Proper	ty Owner Name:	
Project Address:		Assessor's Parcel Number:
Descri	ption of Project:	
		described above be exempted from school facility fees levied by the District pursuant to et. seq. and Government Code Section 65995 et. seq. for the reason(s) set forth below:
Legal A	Authority Description	
	E.C. §17620(a)(1)(C)(i)	"Other than new" residential construction where the resulting increase in assessable space is equal to or less than 500 square feet.
	E.C. §17620(a)(1)(C)(ii)	Exempt construction per Revenue and Taxation Code §74.3(a).
	E.C. §17622	Agricultural construction.
	E.C. §17625(c)	Exempt manufactured home or mobile home.
	E.C. §17625(g)	Relocated manufactured home or mobile home for low income seniors.
	E.C. §17626(a)	Reconstruction of destroyed or damaged structure.
	G.C. §65995(c)(1)	Contract with District entered into on or before January 1, 1987, that requires a separate payment.
	G.C. §65995(d)	Facility used exclusively for religious purposes and is exempt from property taxation.
	G.C. §65995(d)	Facility used exclusively as a full-time day school per E.C. §48222.
	G.C. §65995(d)	Facility owned and occupied by a federal, state, or local agency.
	G.C. 65995.1(b)	State funded and operated migrant housing facility.
	G.C. §65995.1(b)(1)	State funded and operated migrant housing facilities.
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Following or attached to this application is a statement explaining the reasons an exemption is sought for this project, including all information and/or evidence necessary to support this request.

I understand that any exemption granted for the project described above will be expressly conditioned on the project's continued satisfaction of the statutory requirements necessary for that exemption. If further understand that failure to satisfy any and all of the statutory exemption requirements at any time will result in the project being subject to the District's school facility fees.

I certify under penalty of perjury that the information provided above and attached to this application is true and correct to the best of my knowledge and belief.

(Signature of Owner / Agent)	(Date)		
(Owner / Agent Name - please print)	(Telephone Number)		
(Agent Title, if applicable)			
(Owner's Mailing Address)	(City)	(State)	(Zip)