CARMEN CHU ASSESSOR-RECORDER



SAN FRANCISCO OFFICE OF THE ASSESSOR-RECORDER

REQUEST TO REMOVE HOMEOWNER'S EXEMPTION 取消業主自住豁免額申請

This form must be completed in English (此表格必須用英文填寫)

California State Law¹ requires property owners to notify the Assessor when the owner(s) is/are no longer eligible for the exemption. Please complete and return this form if one of the following is true: 加州法律¹規定物業業主不再符合此豁免資格時要立即通知估值官辦公室, 以便及時取消其豁免額。如果以下其中一種情況屬實,請填妥並交回此表格(此表格必須用英文填寫):

加州法律 规定物業業主个再付合此。額。如果以下其中一種情況屬實,請			
☐ The property was rented on (date) / ☐ This property was no longer occupie ☐ An <i>unrecorded</i> transfer of ownership	ed by an owner as of		
¹ If any of the above statements is tru penalty on the escaped assessment purs 如以上任何聲明屬實,根據加州賦稅	suant to California Re	venue and Taxat	ion Code Section 531.6./
Location of property (Street Number & Address Name) / 物業位置(街號及街名)		Parcel Number (Block & Lot) / 物業編號(街區號碼 及 地段號碼)	
Signature of Owner / Agent / 業主 / 經紀人的簽名		Print Name of Owner / Agent / 業主 / 經紀人的正楷姓名 (英文)	
Daytime Phone Number / 日間電話號碼		Date of Request / 申請日期	
Mailing Address / 郵寄地址	City / 城市	State / 州	Zip/郵政編碼
This form is not a Homeowner's Exemple and do not have an exemption, please can exemption if you file the claim form by 如果你自1月1日擁有此物業並自住表。如果你於12月10日之前遞交申	ull (415) 554-5596 for December 10. / 此表 ,但還沒獲得豁免額	a claim form. You 各 <u>不是</u> 業主自住割 ,請致電 (415) 5	u may receive 80% of the 浴免額的申請表。
Please mail completed form to: / 請郵寄填妥的表格至:	San Francisco Assessor-Recorder's Office Homeowners' Exemption Unit 1 Dr. Carlton B. Goodlett Place, Room 190 San Francisco, CA 94102		

NOTE: In the event of any inconsistency between English version and the translated version, the English version shall prevail, to the extent of such inconsistency or conflict. 請注意:如英文版和翻譯版有任何不一致的地方,請以英文版為準。

Rev. 3/5/13 English/ Chinese