

Return this form to:
District Office
Kentfield School District
750 College Avenue
Kentfield, CA 94904
(415) 458-5130

Raquel Rose, Superintendent www.kentfieldschools.org

Fax (415) 458-5138

Board of Trustees

Sarah Killingsworth Heather McPhail Sridharan David Riedel Annie Su Benny Joseph

**Bacich Elementary School** 

699 Sir Francis Drake Blvd. Kentfield, CA 94904 Maria Martin, Principal (415) 925-2220 Fax (415) 925-2226

Kent Middle School

800 College Avenue Kentfield, CA 94904 Grant Althouse, Principal (415) 458-5970 Fax (415) 458-5973

Signature of Applicant

## KENTFIELD SCHOOL DISTRICT 2023-2024 REQUEST FOR PARCEL TAX EXEMPTION

An exemption from the Kentfield Parcel Tax assessment will be made available to homeowners who will attain 65 years of age as of June 30, 2023, or homeowners receiving Disability Supplemental Security Income. Eligibility is defined as the owner-occupant who owns a beneficial interest in the parcel, **uses that parcel as his or her principal place of residence**, and applies to the District on or before June 15, 2023, for the 2023-2024 tax year. 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 his or her principal residence.

## PROPERTY AND HOMEOWNER INFORMATION

Assessor's Parcel Number (APN)			
Name (Last, First)		Date of Birth	
Address		City	Zip Code
Telephone	Email		
PROOF OF ELIGIBILITY (MUST BE INCLUDED WITH THE APPLICATION)			
<ol> <li>Proof of Ownership - Attack your ownership of the proper</li> <li>Proof of Occupancy - Attack</li> <li>Verification of Age - Attack Identification Card.</li> <li>OR</li> <li>Proof of Disability Supplement</li> </ol>	rty. h a copy of yo a copy of a va	ur most recent PG lid Driver's license	&E bill. or California
SIGNATURE REQUIRED			
Under penalty of perjury, I declare the parcel and that this claim (including best of my knowledge, correct and content and co	accompanying		-
Executed on(Month/Day)		at	, California.
(Month/Day)	(Year)	(City of Resid	dence)
		Date	