EF-64-R10-0211-09000378-1 BOE-64 (P1) REV. 10 (02-11)

CLAIM FOR SEISMIC SAFETY CONSTRUCTION EXCLUSION FROM ASSESSMENT

This claim must be filed with the Assessor prior to, or within 30 days of, completion of construction.



| CLAIMANT NAME AND MAILING ADDRESS | FOR ASSESSOR'S USE ONLY |
|--|--|
| (Make necessary corrections to the printed name and mailing address) | DATE RECEIVED |
| | APPROVED DENIED |
| | REASON FOR DENIAL |
| | NEAGON FOR BENIAL |
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| CLAIMANT'S NAME (PLEASE PRINT) | ASSESSOR'S PARCEL NUMBER |
| | |
| STREET ADDRESS (IF DIFFERENT THAN MAILING ADDRESS) | ZIP CODE |
| DATE (OR ANTICIPATED DATE) OF COMPLETION DAYTIME TELEPHONE NUMBER EMAIL ADDRESS | |
| DATE (OR ANTIGIPATED DATE) OF COMPLETION | |
| The present every primary contractor sixil or structure | |
| YES NO The property owner, primary contractor, civil or structure | |
| building department those portions of the project that are by Revenue and Taxation Code section 74.5(b)(2). | e seismic retrollung components, as defined |
| by Revenue and Taxation Code Section 74.5(b)(2). | |
| Section 74.5 of the Revenue and Taxation Code excludes from assessment that po | rtion of an existing structure that consists of the |
| construction and reconstruction of seismic components. | Thor or all existing structure that consists of the |
| In order to receive the exclusion, this claim form must be filed with the assessor prior | to or within 20 days of completion of the project |
| All documents necessary to support the exclusion must be filed with the Assessor by | the property owner not later than six months afte |
| completion of the project. | are property owner not later than one months are |
| The property owner, primary contractor, civil or structural engineer, or architect shall | cortify to the building department these portions |
| of the project that are seismic retrofitting components, as defined by Revenue and Ta | |
| of the project, the building department shall report to the Assessor the costs of the | |
| components. | |
| For purposes of section 74.5 | |
| (1) "Seismic retrofitting components" means seismic retrofitting improvements and im | orovements utilizing earthquake hazard mitigation |
| technologies. | Stovernerits utilizing eartifulake nazaru mitigation |
| (2) "Seismic retrofitting improvements" means retrofitting or reconstruction of an exis | ting building or structure, to abate falling hazard |
| from structural or nonstructural components of any building or structure including, but the structural components of any building or structure including, but the structural components of any building or structure including, but the structural components of any building or structure including, but the structural components of any building or structure including, but the structure including the structure includin | |
| hanging objects, and building cladding that pose serious danger. "Seismic retrof | |
| strengthening or providing the means necessary to resist seismic force levels that | |
| building or structure during an earthquake, so as to significantly reduce hazards to life | |
| safe ingress and egress of building occupants during and immediately after an ear | |
| not include alterations, such as new plumbing, electrical, or other added finishing n performed on an existing structure. "Seismic retrofitting" includes, but is not limited | |
| 5 and 6 of the Uniform Code for Building Conservation of the International Confere | |
| (3) "Improvements utilizing earthquake hazard mitigation technologies" means impro | |
| government as being hazardous to life in the event of an earthquake. These imp | |
| protection of structures. These improvements shall use technologies such as those | |
| 101) of Title 24 of the California Building Code and similar seismic provisions in the | e Uniform Building Code. |
| THIS EXCLUSION EXPIRES UPON CHANGE IN OWNERSH | IIP OF THE PROPERTY. |
| CERTIFICATION | |
| I certify (or declare) under penalty of perjury under the laws of the State of Californi | a that the foregoing and all information hereon. |
| including any accompanying statements or documents, is true, correct and complete | |
| SIGNATURE OF PERSON MAKING CLAIM | DATE |
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