



SUNNYVALE SCHOOL DISTRICT
PARCEL TAX EXEMPTION APPLICATION FORM

Request for EXEMPTION from the Parcel Tax for Owner-Occupants
Age 65 or older on or before June 30, of the start of the current tax year

Assessor's Parcel Number (APN): _____
(found on your property tax bill)

Last Name: _____ First Name: _____

Street Address: _____

City: _____ Zip Code: _____

Phone #: () _____ Birth Date: _____

Under penalty of perjury, I declare that I am the current owner and occupant of the above parcel and that this claim (including any accompanying proof of residence and age) is, to the best of my knowledge, correct and complete.
Signature of Applicant or Designee _____ Date _____

- Please attach a copy of proof of residence and birth date and a copy of your property tax bill
Deliver or mail this form and above documentation by June 30, 2026 to:

Parcel Tax Exemption
Sunnyvale School District
819 West Iowa Avenue
Sunnyvale, CA 94086

If you need help or have any questions about the exemption, please call Cindy Rock at (408) 522-8200 ext. 1057 or cindy.rock@sesd.org

(Office Use Only)

Residence Verification
(One from below)
___ PG & E bill
___ Utility Bill

Birth Date Verification
(One from below)
___ Driver's License
___ Passport
___ DMV Identification Card
___ Birth Certificate
___ Medicare Card

Ownership
___ Property Tax bill

Verified By: _____ Date: _____
Sunnyvale School District