



**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, 2027** 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: _____

Sunnyvale School District

Date: _____