

**REQUEST FOR EXTENSION OF TIME  
TO FILE PROPERTY STATEMENT**

ASSEESSEE'S NAME	SBE NUMBER	LIEN DATE (year)
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ASSEESSEE'S ADDRESS (street, city, state, and ZIP code)

CONTACT PERSON'S NAME	CONTACT PERSON'S EMAIL ADDRESS	CONTACT'S DAYTIME TELEPHONE NUMBER (       )
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First Request for Extension   
  Second Request for Extension

PROPERTY STATEMENT PARTS		EXTENSION DATE REQUESTED	APPROVED (yes/no)	EXTENSION DATE GRANTED
Tangible Property List				
Summary Control				
Statement of Land Changes				
Financial Schedules				
Schedules of Leased Equipment				
Studies and other voluntary information (specify)				
Other requested information (describe below)				

**FOR BOE USE ONLY**

Reason for extension request (Revenue and Taxation Code section 830.1 requires a showing of good cause):

**An extension is not automatically granted.** You will be notified by mail whether the extension is granted or denied. If granted, the notice will state the date to which the extension has been granted.

**FAXED REQUEST to fax number: 916-285-0132**

**CERTIFICATION**

*I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information herein, including accompanying statements or documents, is true and correct and complete to the best of my knowledge and belief. If the owner is a corporation, this document must be signed by an officer of the corporation.*

APPLICANT'S SIGNATURE	DATE
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SIGNATORY'S PRINTED NAME	TITLE
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**FOR BOE USE ONLY**

APPROVAL OR DISAPPROVAL BY BOE STATE-ASSESSED PROPERTIES DIVISION CHIEF

Approved as noted   
  Disapproved

STATE-ASSESSED PROPERTIES DIVISION CHIEF'S SIGNATURE	DATE
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Comments:	<div style="background-color: #cccccc; padding: 5px; border: 1px solid black;"><b>FOR OFFICIAL USE ONLY</b></div>
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