



SUNNYVALE SCHOOL DISTRICT
PARCEL TAX REFUND FORM

Request for **REFUND** from the Parcel Tax for Owner-Occupants Age 65 or older on or before June 30th, of the start of the current tax year. Once paid in full you will be eligible to obtain a refund for the \$59 parcel tax

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, 2025** to:

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

**** NO REFUNDS for current tax year will be issued or approved after JUNE 30, 2025****

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

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

Proof of Payment

___ Canceled Check

___ Receipt of payment

___ County Confirmation

Verified By: _____

Sunnyvale School District

Date: _____