



## City of Oakland

SPARE - Special Assessment Refunds and Exemptions  
150 Frank H. Ogawa Plaza, Suite 5342  
Oakland, CA 94612

**SPARE@OaklandCA.gov**

(510) 238-2942

TDD (510) 238-3254

### **SPECIAL ASSESSMENT EXEMPTION APPLICATION FOR 2026-2027 PROPERTY TAX RELIGIOUS ORGANIZATION OR SCHOOL**

**DEADLINE:** Applications received **on or before May 15th** or next business day thereafter may be eligible for early exemption. Early exemptions remove the qualifying Special Assessment measures before the tax bill is mailed. Applications and qualifying documentation received after May 15th or the next business day thereafter may be eligible for refund exemption. Refund exemptions are check payments equal to the amount of the qualifying exemptions. Checks will only be issued after both property tax payments are made. Refund requests must be made within one (1) year of the final property tax payment.

To qualify for an exemption, the property must be granted a Property Tax Exemption from the Alameda County Assessor's Office according to California Law **(please attach a copy of your exemption documentation submitted to the Alameda County Assessors Office)**. The SPARE exemption shall apply in the same proportion that is exempted from the ad valorem property tax.

The following Special Assessments on Property Tax Statement are eligible for exemption:

Religious Organization or School	
2020 OAK MEASURE Q	100% exemption
OAKLAND MEASURE AA	100% exemption
OAKLAND ZOO MEAS Y	100% exemption
VIOL RED EM RSP-NN	100% exemption
WILDFIRE PREV-MM	100% exemption

#### 1. Property Information

Parcel Number	Property Address
	Oakland, CA 946 _____

#### 2. Organization or Corporate Information

Name	Address

#### 3. Representative Contact Information

Name		Title
Phone Number	Email Address	

4. **AFFIDAVIT:** I certify under penalty of perjury under the laws of the State of California that the foregoing and all information contained herein, including any accompanying documents, is true, correct and complete to the best of my knowledge and belief. I hereby authorize the City of Oakland to verify all the information provided.

Representative Name	Title	Representative Signature	Date

Submit completed application, with supporting documentation, to the address or email at the top of the page.