



Ballot on Assessment for the establishment of the property-based business improvement district known as the "Downtown Community Benefit District"



Assessor's Parcel Number: _____ Address of Parcel: _____

Property Owner's Name: _____

Property Owner's Address: _____

Proposed Assessment for this Parcel Beginning 2026-2027 Fiscal Year: _____ of Total: \$ 11,052,168.00

Proposed Range or Assessment Adjustment Formula: Each year, beginning with FY 2027/28, the Association may increase maximum assessment rates by up to 5% per year to address changes in the cost of providing services. In addition, the District may authorize an increase to cover additional services and activities followed by the potential redevelopment of "Embarcadero Park," as early as the FY 28/29 property tax billing. In no event shall the maximum assessment rates decrease. The assessment shall be levied at rates necessary to generate sufficient revenue to meet the estimated costs to fund the Improvements, as long as the actual assessment rates do not exceed the maximum assessment rates for that fiscal year.

Instructions for Completing and Delivering this Ballot

*To express your view on the proposed assessment and the proposed range or assessment adjustment, check above the line before the word "YES" or "NO" below, then sign and date the ballot.

_____ Yes, I approve the proposed annual assessment described above on the parcel identified in this ballot, and I understand that my assessment could be subject to the assessment adjustment formula described above.

_____ No, I do not approve the proposed annual assessment, on the parcel identified in this ballot, nor the assessment adjustment formula described above.

I hereby declare by penalty of perjury that I am a record owner or authorized agent for the record owner of the parcel listed above.

Signature of Owner of Record, or Authorized Agent

Date

Print Name of Owner or Authorized Agent: If Agent of Owner, State Authorization

***After completing your ballot, please mail to:**

**Director
Department of Elections
P.O. Box 420569
San Francisco, CA 94142**

To hand deliver, please use the following address:

**Director
Department of Elections
City Hall
1 Dr. Carlton B. Goodlett Place, Room 48
San Francisco, CA 94102**

Ballots may also be delivered to the Director at the Public Hearing prior to the close of public testimony.

*Ballots may be sent or delivered to the Director at any time, but MUST be received in the mail not later than 12 P.M. (noontime) on the day of the public hearing or in person before the conclusion of the public testimony portion of the public hearing on the proposed assessment and assessment range. That hearing is set for 3:00 p.m. on July 21, 2026. Ballots received after that time will only be counted if the Board elects to continue public comment until a later date.

Complete the Affidavit on other side

No. <<Barcode>>



AFFIDAVIT of Identification (Property Owner)

I, _____, the undersigned, declare that I am authorized to cast a ballot for the following parcel identified as:

_____, as either
(1) the sole owner or agent, or (2) co-owner or agent to payment of the assessment which will be levied for the proposed Property and Business Improvement District to be known as the “Downtown Community Benefit District.”

I declare under penalty of perjury under the laws of the State of California that this declaration made this ___ the day of _____, 20__ , in the City and County of San Francisco, is true and correct.

Signature Property Owner/Co-Property Owner/Authorized Agent

Print Name Business Owner/Co-Owner/Authorized Agent

Vote on other side