



# Ballot on Assessment for the renewal and expansion of the business-based improvement district known as the “Fisherman’s Wharf Portside Community Benefit District”

«Barcode»

Business Name: \_\_\_\_\_ Address of Business: \_\_\_\_\_

Business Registration Certificate (Business License) Name: \_\_\_\_\_

Business Owner’s Name: \_\_\_\_\_

Business Owner’s Address: \_\_\_\_\_

Proposed Assessment for this Business for the 2020-2021 Fiscal Year: \_\_\_\_\_ of Total: \$ 270,091.08

Proposed Range or Inflation Adjustment Formula: For fiscal year 2 through fiscal year 15: For businesses whose annual assessments are calculated based on a gross sales assessment formula (e.g., restaurant, retail, non-profit), the amount of the assessment may increase or decrease annually according to their reported gross sales. For all Tour/Charter vessel operators, land-based Tour operators, and the Pier 39 Master Tenant, assessments may be increased annually by the greater of either the Bay Area Consumer Price Index (CPI) for all urban consumers for the month of February or by 5%.

### Instructions for Completing and Delivering this Ballot

\*To express your view on the proposed assessment and the proposed range or inflation 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 business identified in this ballot, and I understand that my assessment could be subject to the adjustment formula described above.

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

I hereby declare under penalty of perjury under the laws of the State of California that I am an owner or authorized agent for the record owner of the business 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 \_\_\_\_\_**  
**San Francisco, CA 94142-2189**

**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 November 17, 2020. Ballots received after that time will only be counted if the Board elects to continue public comment until a later date.

No. «Parcel\_Count»