EF-264-AH-R13-0522-27000061-1 BOE-264-AH (P1) REV. 13 (05-22)

COLLEGE EXEMPTION CLAIM

This claim is filed for fiscal year 20 ____ - 20 ____. (Example: a person filing a t imely claim in January 2011 would enter "2011-2012.")



Xochitl Marina Camacho Monterey County Assessor

LEASE

 \square OWN

P. O. Box 570 Salinas, CA 93902-0570 Phone: (831) 755-5035 Fax: (831) 755-5435 assessor@co.monterey.ca.us

CLANATANE AND MAILING ADDRESS		FOR ASSESSOR'S USE ONLY			
CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)					
Г	٦	Received by _	(Assessor's d	designee)	
		of			
			(county o	r city)	
L	٦	on	(dat	e)	
If you no longer seek an exemption at this lo	cation, check here \square Sign and retu	rn this form to the	Assessor. Date v	vacated:	
NAME OF CLAIMANT					
TITLE OF CLAIMANT			DA (YTIME TELEPHO	ONE NUMBER
CORPORATE NAME OF THE COLLEGE				,	
ADDRESS (Street, City, County, State, Zip Code)					
ASSESSOR'S PARCEL NUMBER OR LEGAL DESC		DATE PROPERTY WAS FIRST USED BY CLAIMANT			
1. Owner and operator: (check applicable be Claimant is: Owner and operator and claims exemption on all Land 2. Does the above institution qualify as a color YES NO 3. Is the institution conducted as a non-profit	Owner only Operator only Buildings and improvements lege or seminary of learning under the	and/or	Personal property te of California?		
YES NO					
Does the institution require for regular add YES NO	mission the completion of a four-year	high school cour	se or its equivalen	ť?	
5. Does the institution confer upon its gradual and sciences, or on a course of at least the veterinary medicine, pharmacy, architectury YES NO NO	ree years in professional studies, su	ch as law, theolog	d on a course of at y, education, med	least two year icine, dentistry	s in liberal arts y, engineering,
6. Is the property for which the exemption is YES NO	claimed used exclusively for the pu	rposes of educati	on?		
7. List all buildings and other improvements sheet if necessary. Indicate whether lease					
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDEN	TAL USE		
				LEASE	\square OWN
				LEASE	\square OWN
				LEASE	\square OWN
				LEASE	\square OWN
				LEASE	\square OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



DATE



NAME OF PERSON MAKING CLAIM