EF-264-AH-R13-0522-01000109-1 BOE-264-AH (P1) REV. 13 (05-22)

would enter "2011-2012.")

COLLEGE EXEMPTION C

ALAMEDA COUNTY ASSESSOR 1221 Oak St., Rm 245 Oakland, Ca. 94612-4288

PHONG LA

(510) 272-6587 / FAX (510) 208-4905 www.acgov.org/assessor

264-AH-R13-0522-01000109-1 BOE-264-AH (P1) REV. 13 (05-22)	
COLLEGE EXEMPTION CLAIM	*
This claim is filed for fiscal year 20 20	ALIFORN
(Example: a person filing a timely claim in January 2011	

This claim must be filed by 5:00 p.m., Feb	oruary 15.				
CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)		FOR ASSESSOR'S USE ONLY			
(Make necessary corrections to the printed traine	e and mailing address)	Received by			
			(Assess	or's designee)	
		of	(cou	inty or city)	
		on			
L	_			(date)	
If you no longer seek an exemption at this lo	cation, check here Sign and retu	rn this form to the	e Assessor. Da	ite vacated:	
NAME OF CLAIMANT					
TITLE OF CLAIMANT				DAYTIME TELEPH	ONE NUMBER
CORPORATE NAME OF THE COLLEGE				\ /	
ADDRESS (Street, City, County, State, Zip Code)					
ADDITEGS (Street, Oily, County, State, 219 Code)					
ASSESSOR'S PARCEL NUMBER OR LEGAL DESC	RIPTION		DATE PROPER	TY WAS FIRST USE	D BY CLAIMANT
1. Owner and operator: (check applicable bo					
	☐ Owner only ☐ Operator only		Danaanal	a mile a	
and claims exemption on all Land	☐ Buildings and improvements		Personal prope	-	
Does the above institution qualify as a col YES NO	lege or seminary of learning under th	ne laws of the Sta	te of California	?	
3. Is the institution conducted as a non-profit YES NO	t entity?				
Does the institution require for regular adr YES NO	mission the completion of a four-year	high school cour	se or its equiva	alent?	
5. Does the institution confer upon its graduat and sciences, or on a course of at least th veterinary medicine, pharmacy, architectu YES NO	ree years in professional studies, su	ch as law, theolog			
6. Is the property for which the exemption is	claimed used exclusively for the pu	rposes of educati	ion?		
YES NO					
List all buildings and other improvements sheet if necessary. Indicate whether lease					
BUILDING & IMPROVEMENTS	PRIMARY USE		TAL USE		
				□ LEASE	OWN
					□OWN
				LEASE	□OWN
				LEASE	OWN
				LEASE	OWN
				LEASE	



DATE



NAME OF PERSON MAKING CLAIM