	OF DE	Je	ennifer Perry, A	Assessor	
-264-AH-R13-0522-08000168-1 BOE-264-AH (P1) REV. 13 (05-22)			ounty of Del No 31 H Street, Suite 12		
COLLEGE EXEMPTION CLAIM	8	Cr	escent City, CA 95	531	
This claim is filed for fiscal year 20 20 (Example: a person filing a t imely claim in J anua would enter "2011-2012.")		Te	elephone: (707) 464	-7200	
This claim must be filed by 5:00 p.m., Februa	ary 15.				
CLAIMANT NAME AND MAILING ADDRESS	-	FC	OR ASSESSOR'S	SUSE ONLY	
(Make necessary corrections to the printed name and	mailing address)	Received by _	(Assessor's d		
			1	5	
		of	(county of	r city)	
		on			
L		<u> </u>	(date	e)	
If you no longer seek an exemption at this location	on, check here 🗌 Sign and reti	urn this form to the	Assessor. Date v	acated:	
NAME OF CLAIMANT					
TITLE OF CLAIMANT			DA	YTIME TELEPH	ONE NUMBER
			()	
CORPORATE NAME OF THE COLLEGE					
ADDRESS (Street, City, County, State, Zip Code)					
ASSESSOR'S PARCEL NUMBER OR LEGAL DESCRIPT	ΓΙΟΝ		DATE PROPERTY W	AS FIRST USE	D BY CLAIMAN
	☐ Owner only ☐ Operator onl ☐ Buildings and improvements	and/or	Personal property te of California?		
3. Is the institution conducted as a non-profit en	tity?				
4. Does the institution require for regular admiss	sion the completion of a four-yea	r high school cours	se or its equivalent	t?	
5. Does the institution confer upon its graduates a and sciences, or on a course of at least three veterinary medicine, pharmacy, architecture, f	years in professional studies, su	ich as law, theolog			
6. Is the property for which the exemption is clai	imed used exclusively for the p	urposes of educati	on?		
 List all buildings and other improvements for sheet if necessary. Indicate whether leased o 					
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDEN	TAL USE		
					OWN

			I		
	THIS	DOCUMENT IS SUBJECT TO	PUBLIC INSPECTION		

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EF-	-264-AH-R13-0522-08000168-2 BOE-264-AH (P2) REV. 13 (05-22)	
	 8. Has any construction commenced and/or been completed on this parcel since 12:01 a.m., January 1 of last year? YES NO If YES, please explain: 	
	 9. Is the property, or a portion thereof, for which an exemption is claimed a student bookstore that generates unrelated business taxable income as defined in section 512 of the Internal Revenue Code? YES NO 	
	If YES , a copy of the institution's most recent tax return filed with the Internal Revenue Service must accompany this claim. Property taxes, as determined by establishing a ratio of the unrelated business taxable income to the bookstore's gross income, will be levied.	
	10. Has any of the property listed above been used for business purposes other than a student bookstore? YES NO If YES , please explain:	
	11. If any business is operated by someone other than the college, attach a copy of the lease or other agreement. Please explain:	
12. Is any equipment or other property being leased or rented from someone else?		
	If YES , list on a separate sheet the name and address of the owner and the type, make, model, and serial number of the property. If the property listed is not used exclusively for educational purposes at the collegiate level, please state the other uses of the property. If real property, provide the name and address of the owner.	
	The benefit of a property tax exemption must inure to the lessee institution. If taxes paid by the lessor, see section 202.2 of the Revenue and Taxation Code.	

ADDITIONAL REQUIRED DOCUMENTATION

- Attach a separate page showing the requirements for admission. A current catalog showing the requirements may be substituted.
- Attach a separate page, or current catalog, listing the degrees conferred upon the graduates and the requirements for each degree.
- Attach a copy of the financial statements (balance sheet and operating statement for the preceding fiscal year.)

Whom should we contact during normal business hours for additional information?

NAME		TITLE				
DAYTIME TELEPHONE	EMAIL ADDRESS					
()						
CERTIFICATION						
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.						
SIGNATURE OF PERSON MAKING CLAIM		TITLE				
NAME OF PERSON MAKING CLAIM		DATE				

