EF-264-AH-R13-0522-15000185-1 BOE-264-AH (P1) REV. 13 (05-22)

Laura Avila **Kern County Assessor and Recorder**

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Exemptions Division 1115 Truxtun Ave Bakersfield, CA 93301-4639 (661) 868-3485

COLLEGE EXEMPTION CLAIM This claim is filed for fiscal year 20 - 20

(Example: a person filing a timely claim in January 2011 would enter "2011-2012.")

Thi	is claim must be filed by 5:00 p.m., Fe <mark>k</mark>	oruary 15.					
	CLAIMANT NAME AND MAILING ADDRESS	and and the orange of the second		F	OR ASSESSOR	R'S USE ONLY	
	(Make necessary corrections to the printed name	e and mailing address)	\neg	Received by			
				,	(Assessor	's designee)	
				of	(oount	y or city)	
					(Count	y or city)	
	L		ل	on	(0	date)	
		<u></u>					
If y	ou no longer seek an exemption at this lo	cation, check here Sign and	retui	rn this form to the	e Assessor. Date	e vacated:	
NAN	ME OF CLAIMANT						
INAI	VIE OF GEARMANT						
TITI	LE OF CLAIMANT				[DAYTIME TELEPH	ONE NUMBER
COI	RPORATE NAME OF THE COLLEGE				-	,	
ADI	22520 (0) (10) (10) (10) (10)						
ADL	DRESS (Street, City, County, State, Zip Code)						
ASS	SESSOR'S PARCEL NUMBER OR LEGAL DESC	RIPTION			DATE PROPERTY	/ WAS FIRST USE	D BY CLAIMAN
1 (Owner and operator: (check applicable bo	oxes)					
		Owner only Operator	only	,			
á	and claims exemption on all	☐ Buildings and improvemen	-		Personal proper	ty	
2 [Does the above institution qualify as a col	llege or seminary of learning und	er th				
[YES NO	and the second s					
3. I	s the institution conducted as a non-profi	t entity?					
	YES NO						
4. [Does the institution require for regular add	mission the completion of a four-y	/ear	high school cour	rse or its equivale	ent?	
[YES NO						
a	Does the institution confer upon its gradual and sciences, or on a course of at least the veterinary medicine, pharmacy, architectures YES NO	ree years in professional studies	suc	ch as law, theolog			
6. I	s the property for which the exemption is	claimed used exclusively for the	e pui	rposes of educat	ion?		
	YES NO	·		•			
7 1	ist all buildings and other improvements	for which accomption is alsimod a	- d -	tata tha mrimam.	and incidental	o of ooob Atto	h a aanarata
	ist all buildings and other improvements sheet if necessary. Indicate whether lease						
ſ	BUILDING & IMPROVEMENTS	PRIMARY USE			ITAL USE		
}	DOILDING & IMI NOVEMENTO	I KIMAKI OOL	+	HODEN	TAL OOL	_ □ LEASE	□OWN
}			+				
-			_			LEASE	OWN
						□LEASE	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



TITLE

DATE



SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM