EF-264-AH-R13-0522-36000342-1 BOE-264-AH (P1) REV. 13 (05-22)

would enter "2011-2012.")

COLLEGE EXEMPTION CLAIM

This claim is filed for fiscal year 20 _ _ - 20 (Example: a person filing a timely claim in January 2011

This claim must be filed by 5:00 p.m., February 15.

Josie Gonzales Assessor-Recorder-County Clerk San Bernardino County

222 W. Hospitality Lane, 4th Floor San Bernardino, CA 92415-0311 arc.sbcounty.gov 909-387-8307 or 1-877-885-7654

CLAIMANT NAME AND MAILING ADDRESS		FOR ASSESSOR'S USE ONLY				
(Make necessary corrections to the printed name	and mailing address)	Received by				
'	ı	TROCEIVED BY	(Assess	or's designee)		
		of		ınty or city)		
			(cou	inty or city)		
_ on				(date)		
If you no longer seek an exemption at this lo	cation, check here Sign and retu	rn this form to the	Assessor. Da	ite vacated:		
NAME OF CLAIMANT						
TITLE OF CLAIMANT				DAYTIME TELEPHONE NUMBER		
CORPORATE NAME OF THE COLLEGE				()		
ADDRESS (Street, City, County, State, Zip Code)						
ASSESSOR'S PARCEL NUMBER OR LEGAL DESCRIPTION			DATE PROPERTY WAS FIRST USED BY CLAIMANT			
1. Owner and operator: (check applicable bo	oxes)					
Claimant is:	☐ Owner only ☐ Operator only	,				
and claims exemption on all	☐ Buildings and improvements	and/or \square	Personal prope	erty		
2. Does the above institution qualify as a col	lege or seminary of learning under th	e laws of the Sta	te of California	?		
3. Is the institution conducted as a non-profit 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 graduar and sciences, or on a course of at least th veterinary medicine, pharmacy, architectury YES NO	ree years in professional studies, suc	ch as law, theolog				
			_			
6. Is the property for which the exemption is	ciaimed used exclusively for the pu	rposes of educat	on'?			
YES NO						
7. List all buildings and other improvements sheet if necessary. Indicate whether lease						
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDEN	TAL USE			
				LEASE	\square OWN	
				LEASE	□ OWN	
				LEASE	□ OWN	
				LEASE	OWN	
					OWN	
				LEASE		

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



TITLE

DATE



SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM