EF-264-AH-R13-0522-04000105-1 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 timely claim in January 2011 would enter "2011-2012.")

Alyssa Douglass Butte County Assessor

25 County Center Dr Suite 100 Oroville, CA 95965-3382 (530)538-7721 Fax (530) 538-7991

 ${\it Email: assessors of fice@buttecounty.net}$ Website: www.buttecounty.net/assessor

FOR ASSESSOR'S USE ONLY

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

CLAIMANT NAME AND MAILING ADDRESS

(Make necessary corrections to the printed nam	e and mailing address)	Received	d by	or's designee)	
		of	(cour	nty or city)	
L		on		(date)	
If you no longer seek an exemption at this lo	ocation, check here 🗌 Sign and ı	eturn this form	to the Assessor. Da	te vacated:	
NAME OF CLAIMANT	- 110				
TITLE OF CLAIMANT				DAYTIME TELEPH	ONE NUMBER
CORPORATE NAME OF THE COLLEGE				,	
ADDRESS (Street, City, County, State, Zip Code)	A A A				
ASSESSOR'S PARCEL NUMBER OR LEGAL DESC	CRIPTION		DATE PROPERT	Y WAS FIRST USE	D BY CLAIMANT
Owner and operator: (check applicable be Claimant is: Owner and operator and claims exemption on all Land	r ☐ Owner only ☐ Operator	,	☐ Personal prope	rtv	
Does the above institution qualify as a community YES NO Is the institution conducted as a non-profit YES NO		en the laws of th	e State of California	?	
Does the institution require for regular ad YES NO	mission the completion of a four-y	rear high schoo	course or its equiva	lent?	
5. Does the institution confer upon its gradua and sciences, or on a course of at least th veterinary medicine, pharmacy, architectures YES NO	nree years in professional studies,	such as law, th	based on a course of eology, education, m	f at least two year nedicine, dentistr	rs in liberal arts y, engineering,
6. Is the property for which the exemption is YES NO	claimed used exclusively for the	purposes of e	ducation?		
7. List all buildings and other improvements sheet if necessary. Indicate whether least					
BUILDING & IMPROVEMENTS	PRIMARY USE	INC	IDENTAL USE		
				LEASE	
				LEASE	OWN
				LEASE	OWN
				LEASE	OWN
				LEASE	OWN
				LEASE	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



TITLE

DATE



NAME OF PERSON MAKING CLAIM