	Jennifer Perry, Assessor
EF-264-AH-R13-0522-08000068-1 BOE-264-AH (P1) REV. 13 (05-22)	County of Del Norte
	981 H Street, Suite 120 Crescent City, CA 95531
COLLEGE EXEMPTION CLAIM	Telephone: (707) 464-7200
This claim is filed for fiscal year 20 20 (Example: a person filing a t imely claim in J anuary 2011 would enter "2011-2012.")	1851
This claim must be filed by 5:00 p.m., February 15.	
CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)	FOR ASSESSOR'S USE ONLY
	□ Received by
	Of(county or city)
L	(<i>date</i>)
If you no longer seek an exemption at this location, check here \Box	Sign and return this form to the Assessor. Date 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
AGGEGGOR OF ARGEL NOWIDER ON ELGAE DEGORI FROM	
1. Owner and encoder (she all antifactly have)	
1. Owner and operator: (check applicable boxes)	Operator only
and claims exemption on allLandBuildings and imp	
2. Does the above institution qualify as a college or seminary of lea	
YES NO	ming under the laws of the State of California?
3. Is the institution conducted as a non-profit entity?	
4. Does the institution require for regular admission the completion	of a four-year high school course or its equivalent?
YES NO	
	ic or professional degree, based on a course of at least two years in liberal arts
veterinary medicine, pharmacy, architecture, fine arts, commerce	al studies, such as law, theology, education, medicine, dentistry, engineering, a. or journalism?
YES NO	
 Is the property for which the exemption is claimed used exclusiv 	vely for the nurnoses of education?
YES NO	

7. List all buildings and other improvements for which exemption is claimed and state the primary and incidental use of each. Attach a separate sheet if necessary. Indicate whether leased or owned. Please use a separate claim form for each Assessor's Parcel Number.

	INCIDENTAL USE	PRIMARY USE	BUILDING & IMPROVEMENTS
□ LEASE □ OWN			
LEASE OWN			
LEASE OWN			
LEASE OWN			
LEASE OWN			

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

a. A general construction commenced and/or been completed on this parcel since 12:01 a.m., January 1 of last year? YES NO 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 O If YES NO If YES NO If YES O If YES NO If any business is operated by someone other than the college, attach a copy of the lease or other agreement. Hease explain: If Se any equipment or other property being leased or rented from someone lease? If YES In some table then the name and pddrass of the owner and the type, maken madely and stabiling the there are agreater agreater agreater agreater and address of the owner. If the name and address of the owner. The type type type type type type type	F-264-АН-R13-0522-08000068-2 BOE-264-АН (P2) REV. 13 (05-22)				
a defined in section 512 of the Internal Revenue Code? Image: PES Image: PES Image: PES<		i., January 1 of last year?			
1. Has any of the propertyllisted above been used for business purposes other than a student bookstore? YES NO If YES, please explain: 1. If any business is operated by someone other than the college, attach a copy of the lease or other agreement. Please explain: 1. If, any business is operated by someone other than the college, attach a copy of the lease or other agreement. Please explain: 1. If, any business is operated by someone other than the college, attach a copy of the lease or other agreement. Please explain: 1. If any business is operated by someone other than the college, attach a copy of the lease or other agreement. Please explain: 1. If any business is operated by someone other than the college, attach a copy of the lease or other agreement. Please explain: 1. If any business is operated sheet the name and address of the owner and the type, make, model, and serial number of the property. If a property listed is not used exclusively for educational purposes at the collegiate level, please state the other uses of the property. If a property listed is not used exclusively for educational purposes is situation. If taxes paid by the lessor, see section 202.2 of the Revenue at astation Code. DIDEDNAL REQUIRED DOCUMENTATION • Attach a separate page, or current catalog, listing the degrees conferred upon the graduates and the requirements for each cegree. • Attach a copy of the financial statements (balance sheet and operating statement for the preceding fiscal year.) When sho	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	e Service must accompany this claim. Property taxes,			
<form></form>	10. Has any of the property listed above been used for business purposes other than a stud				
YES	11. If any business is operated by someone other than the college, attach a copy of the lea	se or other agreement. Please explain:			
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 ITTLE	YES NO If YES , list on a separate sheet the name and address of the owner and the type, more property listed is not used exclusively for educational purposes at the collegiate level				
 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	Taxation Code.				
NAME TITLE	 substituted. Attach a separate page, or current catalog, listing the degrees conferred upon the degree. 	he graduates and the requirements for each			
	Whom should we contact during normal business hours for additional information?				
	NAME	TITLE			
() EIVIAIL ADDRESS	DAYTIME TELEPHONE EMAIL ADDRESS				
CERTIFICATION					

SIGNATURE OF PERSON MAKING CLAIM	TITLE
NAME OF PERSON MAKING CLAIM	DATE

