EF-264-AH-R13-0522-14000111-1 BOE-264-AH (P1) REV. 13 (05-22)



County of Inyo Dave Stottlemyre, Assessor

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P.O. Box J Independence, CA 93526 (760) 878-0302 inyoassessor@inyocounty.us

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.")

Τh	iis claim must be filed by 5:00 p.m., Feb	ruary 15.				
• • •	CLAIMANT NAME AND MAILING ADDRESS	ruary 10.		FOR ASSESSOR	S USE ONLY	
	(Make necessary corrections to the printed name	and mailing address)		Received by		
	1	l		(Assessor's	designee)	
				of		
				(county	or city)	
		1		on(da	4-1	
	L	_		(08	te)	
fу	ou no longer seek an exemption at this loo	cation, check here Sign and ret	turr	this form to the Assessor. Date	vacated:	
•						
NΑ	ME OF CLAIMANT	116				
TIT	TLE OF CLAIMANT			D/	YTIME TELEPHO)	ONE NUMBER
CC	ORPORATE NAME OF THE COLLEGE					
٩D	DRESS (Street, City, County, State, Zip Code)	A A // I				
AS	SSESSOR'S PARCEL NUMBER OR LEGAL DESCR	RIPTION		DATE PROPERTY	WAS FIRST USE	D BY CLAIMANT
						
	Owner and operator: (check applicable bo. Claimant is:	xes) ☐ Owner only ☐ Operator on	nlv			
	and claims exemption on all Land	☐ Buildings and improvements	•	and/or Personal property	1	
	Does the above institution qualify as a coll					
	YES NO					
3.	Is the institution conducted as a non-profit	entity?	7			
	YES NO		N			
4.	Does the institution require for regular adm	nission the completion of a four-year	ar h	igh school course or its equivalen	nt?	
	YES NO					
	Does the institution confer upon its graduat					
	and sciences, or on a course of at least thr veterinary medicine, pharmacy, architectur				licine, dentistry	y, engineering
	YES NO					
2		plaimed used avaluatively for the p	urr	posses of adjustion?		
Ο.	Is the property for which the exemption is	daimed used exclusively for the p	uip	ooses of education?		
	YES NO					
	List all buildings and other improvements f sheet if necessary. Indicate whether lease					
	BUILDING & IMPROVEMENTS	PRIMARY USE	Τ	INCIDENTAL USE		
					LEASE	\square OWN
					LEASE	\square OWN
					LEASE	\square OWN
					LEASE	OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



TITLE

DATE



SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM