EF-264-AH-R13-0522-15000141-1 BOE-264-AH (P1) REV. 13 (05-22)

COLLEGE EXEMPTION CLAIM

Laura Avila **Kern County Assessor and Recorder**

1115 Truxtun Avenue Bakersfield, CA 93301 Ph: 661-868-3485 assessor@co.kern.ca.us

This claim is filed for fiscal year 20 - 20 (Example: a person filing a timely claim in January 2011 would enter "2011-2012.")

This claim must be filed by 5:00 p.m., Feb	oruary 15.		
CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name	and mailing addraga	FOR ASSESSOR	S'S USE ONLY
(make necessary corrections to the printed hame	e and mailing address)	Received by	s designee)
		,	s designee)
		Of(county	or city)
		on	
L	_	(0	late)
If you no longer seek an exemption at this lo	cation, check here Sign and ret	urn this form to the Assessor. Date	vacated:
NAME OF CLAIMANT	116		
TITLE OF CLAIMANT			AYTIME TELEPHONE NUMBER
CORPORATE NAME OF THE COLLEGE			_
ADDRESS (Street, City, County, State, Zip Code)	A A A I		
ASSESSOR'S PARCEL NUMBER OR LEGAL DESC	RIPTION	DATE PROPERTY	WAS FIRST USED BY CLAIMANT
1. Owner and operator: (check applicable bo	oxes) Owner only Operator on	ly	
and claims exemption on all Land	☐ Buildings and improvements	and/or	у
2. Does the above institution qualify as a col	lege or seminary of learning under	the laws of the State of California?	
3. Is the institution conducted as a non-profit YES NO	t entity?	V U I	
Does the institution require for regular adr YES NO	mission the completion of a four-year	ar high school course or its equivale	ent?
5. Does the institution confer upon its graduat and sciences, or on a course of at least th veterinary medicine, pharmacy, architectu	ree years in professional studies, se	uch as law, theology, education, me	
6. Is the property for which the exemption is	claimed used exclusively for the p	urposes of education?	
YES NO	, , , , , , , , , , , , , , , , , , , ,	. ,	
List all buildings and other improvements sheet if necessary. Indicate whether lease			
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL USE	
			_ │
			☐ LEASE ☐ OWN
			☐ LEASE ☐ OWN
			□ LEASE □ OWN
			LEASE OWN
			LEASE OWN
T I		I .	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



TITLE

DATE



SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM