EF-264-AH-R13-0522-24000049-1 BOE-264-AH (P1) REV. 13 (05-22)

## **COLLEGE EXEMPTION CLAIM**

2222 M STREET MERCED, CA 95340 TELEPHONE (209) 385-7631 FAX (209) 725-3956

www.co.merced.ca.us\assessor

MATT H. MAY, ASSESSOR

**MERCED COUNTY** 

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., February 15.

	CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)		FOR ASSESSOR'S USE ONLY			
			Received by			
		٦	(Assessor	's designee)		
			of(count	y or city)		
			on			
	L	_	(0	date)		
lf you n	o longer seek an exemption at this lo	cation, check here 🗌 Sign and retur	n this form to the Assessor. Date	vacated:		
NAME C	OF CLAIMANT					
TITLE O	F CLAIMANT		Ţ	DAYTIME TELEPH	ONE NUMBER	
CORPO	RATE NAME OF THE COLLEGE			)		
CONTO	TATE NAME OF THE GOLLEGE					
ADDRES	SS (Street, City, County, State, Zip Code)	A A A F				
ASSESS	SOR'S PARCEL NUMBER OR LEGAL DESC	RIPTION	DATE PROPERTY	' WAS FIR <mark>ST</mark> USE	D BY CLAIMANT	
	er and operator: (check applicable bo					
	mant is:					
	claims exemption on all Land	☐ Buildings and improvements	and/or Personal propert	y		
	s the above institution qu <mark>al</mark> ify as a col YES NO	lege or seminary of learning under th	e laws of the State of California?			
ш	e institution conducted as a non-profit	t ontitu?				
	YES NO	t entity?				
ш	s the institution require for regular adr	mission the completion of a four-year	high school course or its equivale	ent?		
	YES NO		The second secon			
5. Does	s the institution confer upon its gradua	tes at least one academic or professio	nal degree, based on a course of	at least two year	s in liberal arts	
	sciences, or on a course of at least th rinary medicine, pharmacy, architectu			edicine, dentistry	y, engineering,	
	YES NO	re, lifte arts, commerce, or journalish				
	e property for which the exemption is	claimed used <b>exclusively</b> for the pur	rooses of education?			
	YES NO	,	, , , , , , , , , , , , , , , , , , ,			
7 List	all buildings and other improvements	for which exemption is claimed and s	tate the primary and incidental us	e of each Attac	ch a conarato	
	et if necessary. Indicate whether lease					
	BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL USE			
				LEASE	$\square$ OWN	
				LEASE	$\square$ OWN	
				LEASE	$\square$ OWN	
				LEASE	$\square$ OWN	
				LEASE	$\square$ OWN	
				□LEASE	□ OWN	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION





