EF-264-AH-R13-0522-26000151-1 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 t imely claim in January 2011 would enter "2011-2012.")



Mono County Office Of The Assessor Barry Beck, Assessor

PO Box 456

Bridgeport, CA 93517-0456 Telephone: 760-932-5510 Fax: 760-932-5511

Email: assessor@mono.ca.gov

Website: www.monocounty.ca.gov/assessor

LEASE

This claim must be filed by 5:00 p.m., Feb	ruary 15.				
CLAIMANT NAME AND MAILING ADDRESS		FOR ASSESSO	FOR ASSESSOR'S USE ONLY		
(Make necessary corrections to the printed name	and mailing address)	Received by	or's designee)		
		·	r's designee)		
		of(cour	nty or city)		
		on			
L			(date)		
If you no longer seek an exemption at this loo	cation, check here 🗌 Sign and re	eturn this form to the Assessor. Da	te vacated:		
NAME OF CLAIMANT					
TITLE OF CLAIMANT			DAYTIME TELEPHO	ONE NUMBER	
CODDODATE NAME OF THE COLLEGE			()		
CORPORATE NAME OF THE COLLEGE					
ADDRESS (Street, City, County, State, Zip Code)					
ASSESSOR'S PARCEL NUMBER OR LEGAL DESCR	RIPTION	DATE PROPERT	Y WAS FIRST USE	D BY CLAIMANT	
				2 2 . 02	
1. Owner and operator: (check applicable box	xes)				
Claimant is:		only			
and claims exemption on all Land	☐ Buildings and improvements	s and/or	rty		
2. Does the above institution qualify as a coll	ege or seminary of learning unde	r the laws of the State of California	?		
YES NO					
3. Is the institution conducted as a non-profit	entity?				
YES NO					
4. Does the institution require for regular adm	nission the completion of a four-ye	ear high school course or its equiva	lent?		
YES NO					
Does the institution confer upon its graduate and sciences, or on a course of at least thr	es at least one academic or profes	sional degree, based on a course of	at least two year	rs in liberal arts	
veterinary medicine, pharmacy, architectur			edicine, dentistry	y, engineening,	
YES NO					
6. Is the property for which the exemption is	claimed used exclusively for the	purposes of education?			
YES NO					
7. List all buildings and other improvements f	or which exemption is claimed an	d state the primary and incidental u	se of each. Attac	ch a separate	
sheet if necessary. Indicate whether lease					
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL USE			
			LEASE		
			LEASE	\square OWN	
			LEASE	\square OWN	
			LEASE	\square OWN	



TITLE

DATE



SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM