EF-264-AH-R13-0522-37000119-1 BOE-264-AH (P1) REV. 13 (05-22)

COLLEGE EXEMPTION CLAIM

San Diego County Assessor 1600 Pacific Highway, Suite 103

San Diego, CA 92101 Phone: (619) 236-3771

Jordan Marks

E-mail: arcc.fgg@sdcounty.ca.gov

This claim is filed for fiscal year 20	20
(Example: a person filing a t imely claim i	n January 2011
would optor !!2011 2012 !!\	

would enter "2011-2012.") This claim must be filed by 5:00 n m. February 15

i nis ciaim must be filed by 5:00 p.m., reb	ruary 15.			
CLAIMANT NAME AND MAILING ADDRESS		FOR ASSESSOR'S USE ONLY		
(Make necessary corrections to the printed name	and mailing address)	Received by		
·	·	(Asse	essor's designee)	
		of	county or city)	
			county or city)	
L	ل	on	(date)	
f you no longer seek an exemption at this loo	cation, check here Sign and reti	urn this form to the Assessor.	Date vacated:	
NAME OF CLAIMANT				
TITLE OF CLAIMANT			DAYTIME TELEPH	ONE NUMBER
CORPORATE NAME OF THE COLLEGE			,	
ADDRESS (Street, City, County, State, Zip Code)	A A A I			
ASSESSOR'S PARCEL NUMBER OR LEGAL DESCR	RIPTION	DATE PROPE	ERTY WAS FIRST USE	D BY CLAIMANT
Owner and operator: (check applicable box	vec)			
Claimant is:	☐ Owner only ☐ Operator on	V		
and claims exemption on all Land	☐ Buildings and improvements	and/or Personal pro	perty	
2. Does the above institution qualify as a coll				
YES NO	9 0 00 11111111111111111111111111111111			
3. Is the institution conducted as a non-profit	entity?			
YES NO	Criaty:	V		
4. Does the institution require for regular adm	vicaion the completion of a four year	r high ashaal source or its agu	ivolont?	
YES NO	iission the completion of a four-year	i flight school course of its equ	ivalent?	
Does the institution confer upon its graduate and sciences, or on a course of at least thr				
veterinary medicine, pharmacy, architectur			,	,,gg
YES NO				
6. Is the property for which the exemption is	claimed used exclusively for the p	urposes of education?		
YES NO				
7 List all buildings and other impressorements f	or which averaging is alsimod and	atata the primary and incident	alwaa af aaab Atta	.h
List all buildings and other improvements f sheet if necessary. Indicate whether lease				
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL USE		
			LEASE	OWN
			LEASE	OWN
			LEASE	
			LEASE	
			LEASE	OWN
			LEASE	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.

TITLE

DATE



SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM