EF-264-AH-R13-0522-39000131-1 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 timely claim in January 2011 would enter "2011-2012.")



Steve J. Bestolarides **Assessor-Recorder-County Clerk**

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San Joaquin County 44 N San Joaquin Street Suite 230 Stockton, CA 95202-3273 Telephone (209) 468-2658 www.sjgov.org/assessor_recorder

Thi	s claim must be filed by 5:00 p.m., Feb	ruary 15.				
CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)		-	FOR ASSESSOR'S USE ONLY			
		and mailing address)	Received by			
			(Assessor's c	lesignee)		
			of(county of	or city)		
			(county o	r Gity)		
	L	لـ	ON(dat	e)		
If y	ou no longer seek an exemption at this lo	cation, check here Sign and retu	urn this form to the Assessor. Date v	/acated:		
NAI	ME OF CLAIMANT	116.				
TITI	LE OF CLAIMANT		DA (YTIME TELEPHO	NE NUMBER	
COI	RPORATE NAME OF THE COLLEGE			_		
ADI	DRESS (Street, City, County, State, Zip Code)	/				
ASS	SESSOR'S PARCEL NUMBER OR LEGAL DESC	RIPTION	DATE PROPERTY V	VAS FIR <mark>ST</mark> USED	BY CLAIMANT	
	Owner and operator: (check applicable bo		y			
á	and claims exemption on all Land	☐ Buildings and improvements	and/or Personal property			
2. Does the above institution qualify as a college or seminary of learning under the laws of the State of California? YES NO						
١						
3. I	s the institution conducted as a non-profit YES NO	entity?	V			
4. [Does the institution require for regular adr	nission the completion of a four-yea	r high school course or its equivalen	t?		
l	YES NO					
a	Does the institution confer upon its graduated and sciences, or on a course of at least the reterinary medicine, pharmacy, architecture.	ree years in professional studies, su	ich as law, theology, education, med	least two years icine, dentistry,	in liberal arts engineering,	
	YES NO					
6. I	s the property for which the exemption is	claimed used exclusively for the po	urposes of education?			
	YES NO					
	7. List all buildings and other improvements for which exemption is claimed and state the primary and incidental use of each. Attach a separate sheet if necessary. Indicate whether leased or owned. Please use a separate claim form for each Assessor's Parcel Number.					
ſ	BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL USE			
				LEASE	OWN	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION





TITLE

SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM