EF-264-AH-R13-0522-42000098-1 BOE-264-AH (P1) REV. 13 (05-22)

Joseph E. Holland County Clerk, Recorder and Assessor

 \square LEASE

P.O. Box 159

Santa Barbara, CA 93102-0159 Santa Barbara: (805) 568-7899 6-8310

COLLEGE EXEMPTION CLAIM

This claim is filed for fiscal year 20 20 (Example: a person filing a t imely claim in J anuary 2011 would enter "2011-2012.")	ALIFORNI	Santa Barbara. (805) 346-8310
This claim must be filed by 5:00 p.m., February 15. CLAIMANT NAME AND MAILING ADDRESS	FOR ASSESSOR'S USE ONLY	
(Make necessary corrections to the printed name and mailing address)		Received by
		of(county or city)
L	١	on
If you no longer seek an exemption at this location, check here	Sign and retur	n this form to the Assessor. Date vacated:
NAME OF CLAIMANT		
TITLE OF CLAIMANT		DAYTIME TELEPHO
CORPORATE NAME OF THE COLLEGE		

			on	
	L	_		(date)
fу	ou no longer seek an exemption at this lo	cation, check here 🗌 Sign and retu	urn this form to the Assessor.	Date vacated:
NA	ME OF CLAIMANT			
TIT	TLE OF CLAIMANT			DAYTIME TELEPHONE NUMBER
00	PRPORATE NAME OF THE COLLEGE			()
-				
٩D	DRESS (Street, City, County, State, Zip Code)	A A A I		
AS	SESSOR'S PARCEL NUMBER OR LEGAL DESC	RIPTION	DATE PROP	ERTY WAS FIR <mark>ST</mark> USED BY CLAIMAN
1.	Owner and operator: (check applicable bo	oxes)		
	Claimant is:	Owner only Operator onl	у	
	and claims exemption on all	☐ Buildings and improvements	and/or Personal pro	pperty
2.	Does the above institution qualify as a co	llege or seminary of learning under t	he laws of the State of Californ	nia?
	YES NO			
3.	Is the institution conducted as a non-profi	t entity?		
	YES NO			
4.	Does the institution require for regular ad	mission the completion of a four-yea	r high school course or its equ	ivalent?
	YES NO			
	Does the institution confer upon its gradua and sciences, or on a course of at least th			
	veterinary medicine, pharmacy, architectu			i, medicine, dentistry, engineening
	YES NO			
6.	Is the property for which the exemption is	claimed used exclusively for the pu	urposes of education?	
	YES NO			
7.	List all buildings and other improvements	for which exemption is claimed and	state the primary and incident	al use of each. Attach a separate
	sheet if necessary. Indicate whether lease			
	BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL USE	
				☐ LEASE ☐ OWN
				☐ LEASE ☐ OWN
				☐ LEASE ☐ OWN
				☐ LEASE ☐ OWN
				☐ LEASE ☐ OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



TITLE

DATE



SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM