EF-264-AH-R13-0522-57000075-1 BOE-264-AH (P1) REV. 13 (05-22)

COLLEGE EXEMPTION CLAIM This claim is filed for fiscal year 20

(Example: a person filing a timely claim in January 2011

- 20

COUNTY ASSESSOR 625 Court St, Rm. 104

YOLO COUNTY

Woodland, CA 95695 Woodland/Davis (530) 666-8135 West Sacramento (916) 375-6496 Fax (530) 666-8213

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Co	unty of	Yolo	>>	7
	Found	ed 1850		

would enter "2011-2012.")		assessor@yolocou	nty.org		
This 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			
Γ	7	Received by	's designee)		
		of			
		(count	y or city)		
L	ل_	on	date)		
If you no longer seek an exemption at this loc	cation, check here Sign and retu	ırn 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 DESCRIPTION	RIPTION	DATE PROPERTY	WAS FIRST USE	D BY CLAIMANT	
Owner and operator: (check applicable bo	vesl				
Claimant is:		y			
and claims exemption on all Land	☐ Buildings and improvements	and/or Personal propert	ty		
Does the above institution qualify as a coll YES NO	ege or seminary of learning under the	ne laws of the State of California?			
3. Is the institution conducted as a non-profit YES NO	entity?	V U I			
4. Does the institution require for regular adr	nission the completion of a four-yea	r high school course or its equivale	ent?		
YES NO					
5. Does the institution confer upon its graduat					
and sciences, or on a course of at least the veterinary medicine, pharmacy, architecture			edicine, dentistr	y, engineering	
YES NO					
6. Is the property for which the exemption is	claimed used exclusively for the pu	irposes of education?			
YES NO					
7. List all buildings and other improvements is sheet if necessary. Indicate whether lease					
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL USE			
			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