EF-264-AH-R13-0522-04000068-1 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

Alyssa Douglass Butte County Assessor

25 County Center Dr Suite 100 Oroville, CA 95965-3382 (530)538-7721 Fax (530) 538-7991

 ${\it Email: assessors of fice@buttecounty.net}$ Website: www.buttecounty.net/assessor

FOR ASSESSOR'S USE ONLY

LEASE

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

CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)
I

(make necessary corrections to the printed name	, and maining address)	Received by			
		of(county	or city)		
L	١	on(da	ate)		
If you no longer seek an exemption at this location, check here Sign and return this form to the Assessor. Date vacated:					
NAME OF CLAIMANT TITLE OF CLAIMANT	# 15	P	AYTIME TELEPHO	ONE NUMBER	
CORPORATE NAME OF THE COLLEGE)		
ADDRESS (Street, City, County, State, Zip Code)	A A A				
ASSESSOR'S PARCEL NUMBER OR LEGAL DESC	RIPTION	DATE PROPERTY	WAS FIRST USE	D BY CLAIMANT	
Owner and operator: (check applicable both Claimant is: Owner and operator)		у			
and claims exemption on all Land	☐ Buildings and improvements	and/or Personal property	/		
2. Does the above institution qualify as a col	lege or seminary of learning under t	he laws of the State of California?			
3. Is the institution conducted as a non-profit YES NO	t entity?	V U I	1		
4. Does the institution require for regular admission the completion of a four-year high school course or its equivalent? YES NO					
5. Does the institution confer upon its graduat and sciences, or on a course of at least th veterinary medicine, pharmacy, architectu YES NO	ree years in professional studies, su	ich <mark>as law, theo</mark> log <mark>y, education, med</mark>	t least two year dicine, dentistry	rs in liberal arts y, engineering,	
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 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.					
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL USE			
			LEASE	\square OWN	
			LEASE	\square OWN	
			LEASE	\square OWN	
			LEASE	\square OWN	
			LEASE	\square OWN	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



DATE



NAME OF PERSON MAKING CLAIM