EF-264-AH-R13-0522-26000112-1 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 t imely claim in January 2011 would enter "2011-2012.")

_. 11

Mono County Office Of The Assessor Barry Beck, Assessor

PO Box 456

Bridgeport, CA 93517-0456 Telephone: 760-932-5510 Fax: 760-932-5511

Email: assessor@mono.ca.gov

Website: www.monocounty.ca.gov/assessor

LEASE

This claim must be filed by 5:00 p.m., Feb	oruary 15.			
CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)		FOR ASSESSOR'S USE ONLY		
(маке несеззату сопесионя to the printed hame		Received by	(Assessor's designee)	
		of	(county or city)	
L		on	(date)	
If you no longer seek an exemption at this lo	cation, check here Sign and re	eturn this form to the Assess	or. Date vacated:	
NAME OF CLAIMANT				
TITLE OF CLAIMANT			DAYTIME TELEPHONE NUMBER	
CORPORATE NAME OF THE COLLEGE				
ADDRESS (Street, City, County, State, Zip Code)	A A /			
ASSESSOR'S PARCEL NUMBER OR LEGAL DESC	RIPTION	DATE PR	ROPERTY WAS FIRST USED BY CLAIMANT	
1. Owner and operator: (check applicable bo		only		
and claims exemption on all Land	☐ Buildings and improvements	s and/or 🔲 Persona	l property	
2. Does the above institution qualify as a colYES NO3. Is the institution conducted as a non-profit		r the laws of the State of Cal	ifornia?	
YES NO		V		
Does the institution require for regular adr YES NO	nission the completion of a four-ye	ear high school course or its	equivalent?	
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,	such as law, theology, educa		
6. Is the property for which the exemption is	claimed used exclusively for the	purposes of education?		
YES NO				
7. List all buildings and other improvements sheet if necessary. Indicate whether lease				
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL US	E	
			☐ LEASE ☐ OWN	
			☐ LEASE ☐ OWN	
			☐ LEASE ☐ OWN	
			☐ LEASE ☐ OWN	
			☐ LEASE ☐ OWN	

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