EF-264-AH-R13-0522-34000099-1 BOE-264-AH (P1) REV. 13 (05-22)

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This (Exan would

This claim must be filed by 5:00 p.m., February 15.

LEGE EXEMPTION CLAIM		
claim is filed for fiscal year 20	20	
mple: a person filing a t imely claim in d enter "2011-2012.")	January 2	2011

CHRISTINA WYNN SACRAMENTO COUNTY ASSESSOR

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INSTITUTIONAL EXEMPTIONS SECTION 3636 American River Drive, Suite 200 Sacramento, CA 95864-5952 Phone (916) 875-0720 FAX (916) 854-9181 https://assessor.saccounty.gov

This claim mast be med by 5.00 p.m., I eb	iddig io.	FOR ASSESSO	R'S LISE ONLY	7
CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name	and mailing address)		IN O USE ONLY	
Г	-	Received by	or's designee)	
		of(cour	nty or city)	
L	-	on	(date)	
f you no longer seek an exemption at this loc	cation, check here Sign and re	eturn this form to the Assessor. Da	te vacated:	
NAME OF CLAIMANT	116		DAVEME TELEPIL	ONE NUMBER
TITLE OF CLAIMANT CORPORATE NAME OF THE COLLEGE			DAYTIME TELEPH ()	ONE NUMBER
SOLU STATE IV WILL OF THE OULLOC				
ADDRESS (Street, City, County, State, Zip Code)	A A A			
ASSESSOR'S PARCEL NUMB <mark>ER OR LEG</mark> AL DESC	RIPTION	DATE PROPERT	Y WAS FIRST USE	D BY CLAIMANT
1. Owner and operator: (check applicable bo.	xes)			
Claimant is:	☐ Owner only ☐ Operator of	nly		
and claims exemption on all Land	☐ Buildings and improvements	s and/or Personal prope	rty	
2. Does the above institution qualify as a coll YES NO 3. Is the institution conducted as a non-profit YES NO		the laws of the State of California	?	
4. Does the institution require for regular adn	nission the completion of a four-ye	ear high school course or its equiva	lent?	
5. Does the institution confer upon its graduate	es at least one academic or profes	sional degree, based on a course of	f at least two year	re in liberal arte
and sciences, or on a course of at least thr veterinary medicine, pharmacy, architectur	ee years in professional studies,	such as law, theology, education, m		
YES NO				
6. Is the property for which the exemption is	claimed used exclusively for the	purposes of education?		
YES NO				
 List all buildings and other improvements f sheet if necessary. Indicate whether lease 				
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL USE		
			LEASE	\square OWN
			LEASE	\square OWN
			LEASE	\square OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



TITLE

DATE



SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM