EF-264-AH-R13-0522-27000088-1 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.")



Xochitl Marina Camacho Monterey County Assessor

P. O. Box 570 Salinas, CA 93902-0570 Phone: (831) 755-5035 Fax: (831) 755-5435

assessor@co.monterey.ca.us

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 nam	e and mailing address)	ailing address)	Received by			
				(Assessor	s designee)		
				of(county	or city)		
					• •		
	L			on	ate)		
fvous	longer cook an exemption at this la	postion shock here Circinate	d retur	n this form to the Assesser D. (vesete -l:		
ı you no	longer seek an exemption at this lo	ocation, check here Sign and	u retur	ii uiis ioiiii to the Assessor. Date	vacated:		
NAME OF	CLAIMANT						
TITLE OF	CLAIMANT				AYTIME TELEPH	ONE NUMBER	
CORPOR	ATE NAME OF THE COLLEGE				_		
ADDRESS	(Street, City, County, State, Zip Code)						
		Λ Λ Λ					
ASSESSC	OR'S PARCEL NUMBER OR LEGAL DESC	CRIPTION		DATE PROPERTY	WAS FIRST USE	D BY CLAIMANT	
		/////					
1. Owne Claim	r and operator: (check applicable bo ant is: ☐ Owner and operator		or only				
	aims exemption on all Land		•	and/or Personal propert	V		
	the above institution qualify as a co				,		
Z. DOES		or serimary or rearring art		or the state of Samornia:			
	institution conducted as a non-profi	it entity?					
YE							
4. Does	the institution require for regular ad	mission the completion of a four	r-vear	high school course or its equivale	nt?		
YE			Jour	and the equivalence of the equivalence			
5. Does f	he institution confer upon its gradua	ites at least one academic or pro	fessio	nal degree, based on a course of a	it least two veai	s in liberal arts	
and so	ciences, or on a course of at least th	nree y <mark>ea</mark> rs in pro <mark>fes</mark> sional studie	es, suc	<mark>h as law, the</mark> olog <mark>y,</mark> education, me			
	nary medicine, pharmacy, architectu	ure, tine arts, commerce, or jour	nalism				
YE							
	property for which the exemption is	claimed used exclusively for t	he pur	poses of education?			
YE	ES NO						
	buildings and other improvements if necessary. Indicate whether lease						
E	BUILDING & IMPROVEMENTS	PRIMARY USE		INCIDENTAL USE			
					LEASE	\square OWN	
					LEASE	\square OWN	
					LEASE	OWN	
					LEASE	OWN	
					LEASE	_ ☐ OWN	
					LEASE	□OWN	
1		i .	1				

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



TITLE

DATE



SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM