EF-264-AH-R13-0522-44000097-1 BOE-264-AH (P1) REV. 13 (05-22)

## **COLLEGE EXEMPTION CLAIM**



**County of Santa Cruz Assessor** 701 Ocean Street, Rm. 130

Santa Cruz, CA 95060 Phone: 831-454-2002

**Sheri Thomas** 

Email: asrwebmail@co.santa-cruz.ca.us

This claim is filed for fiscal year 20 _	20
(Example: a person filing a timely clain would enter "2011-2012.")	n in January 201

This claim must be filed by 5:00 p.m., Fel	oruary 15.			
CLAIMANT NAME AND MAILING ADDRESS	ordary re-	FOR ASSESSO	R'S USE ONLY	,
(Make necessary corrections to the printed name	e and mailing address)	Received by		
ı	'	(Assesso	r's designee)	
		of		
		(coun	ty or city)	
L	1	on	(date)	
_	_		(0010)	
f you no longer seek an exemption at this lo	cation, check here 🗌 Sign and ret	urn this form to the Assessor. Dat	e vacated:	
NAME OF CLAIMANT	<b>-1</b>   <b>C</b>			
TITLE OF CLAIMANT			DAYTIME TELEPHO	ONE NUMBER
CORPORATE NAME OF THE COLLEGE				
ADDRESS (Street, City, County, State, Zip Code)				
ASSESSOR'S PARCEL NUMBER OR LEGAL DESC	DIDTION	DATE DRODEDT	Y WAS FIRST USE	D DV CLAIMANT
ASSESSOR'S FARCEL NUMBER OF LEGAL DESC	RIP IION	DATE PROPERT	T WAS FIRST USE	D BT CLAIMANT
1. Owner and anaratory (about applicable by	2000)			
<ol> <li>Owner and operator: (check applicable both claimant is:</li></ol>		ly		
and claims exemption on all Land	☐ Buildings and improvements	and/or Personal proper	rty	
2. Does the above institution qualify as a co	llege or seminary of learning under	he laws of the State of California?		
YES NO				
3. Is the institution conducted as a non-profi	t entity?	V		
4. Does the institution require for regular ad	mission the completion of a four-yea	r high school course or its equival	lent?	
YES NO				
5. Does the institution confer upon its gradua	tes at least one academic or profess	onal degree, based on a course of	at least two year	s in liberal arts
and sciences, or on a course of at least th	iree y <mark>ea</mark> rs in pro <mark>fes</mark> sional studies, si	uch <mark>as law, theology, education, m</mark>		
veterinary medicine, pharmacy, architectu	ire, fine arts, commerce, or journalis	m?		
YES NO				
6. Is the property for which the exemption is	claimed used <b>exclusively</b> for the p	urposes of education?		
YES NO				
<ol><li>List all buildings and other improvements sheet if necessary. Indicate whether lease</li></ol>				
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL USE		
			LEASE	□ OWN
			LEASE	□ OWN
			LEASE	□ OWN
			LEASE	$\square$ OWN
			LEASE	□ OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



TITLE

DATE



SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM