EF-264-AH-R13-0522-49000099-1 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 would enter "2011-2012.")

Deva Marie Proto Sonoma County Clerk-Recorder-Assessor

Rm 104 Fiscal Bldg 585 Fiscal Dr. Santa Rosa, CA 95403-2872 TELEPHONE: (707) 565-1888 FAX: (707) 565-3317

www.sonoma-county.org/assessor

This claim must be filed by 5:00 p.m., February 15. FOR ASSESSOR'S USE ONLY CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address) Received by __ (Assessor's designee) of.

			(county or city)	
		on		
L	_		(date)	
If you no longer seek an exemption at this lo	cation, check here Sign and re	turn this form to the Ass	essor. Date vacated:	
NAME OF CLAIMANT	116			
TITLE OF CLAIMANT			DAYTIME TELEPH	IONE NUMBER
CORPORATE NAME OF THE COLLEGE				
ADDRESS (Street, City, County, State, Zip Code)	/			
ASSESSOR'S PARCEL NUMBER OR LEGAL DESC	RIPTION	DATI	E PR <mark>OPERTY WAS FIRST</mark> USE	D BY CLAIMANT
1. Owner and operator: (check applicable bo		uly		
and claims exemption on all Land	☐ Buildings and improvements	and/or	onal property	
Does the above institution qualify as a color YES NO 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 add YES NO	mission the completion of a four-year	ar high school course or	its equivalent?	
5. Does the institution confer upon its gradua and sciences, or on a course of at least th veterinary medicine, pharmacy, architectu	ree years in professional studies, s	uch as law, theology, ed		
YES NO				
6. Is the property for which the exemption is	claimed used exclusively for the p	ourposes of education?		
List all buildings and other improvements sheet if necessary. Indicate whether lease				
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL	USE	
			□LEASE	\square OWN
			□LEASE	\square OWN
			□LEASE	\square OWN
			□LEASE	\square 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