EF-264-AH-R12-0516-15000617-1 BOE-264-AH (P1) REV. 12 (05-16)

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.")



Laura Avila Kern County Assessor and Recorder

Exemptions Division 1115 Truxtun Ave Bakersfield, CA 93301-4639 (661) 868-3485

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

CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name	e and mailing address)				
Г	_	F	OR ASSESSOR'S	S USE ONLY	•
		Received by			
			(Assessor's d	designee)	
		of	(county o	r city)	
L	-	on			
			(dat	e)	
NAME OF CLAIMANT					
TITLE OF CLAIMANT			DA'	YTIME TELEPH	ONE NUMBER
CORPORATE NAME OF THE COLLEGE					
ADDRESS (Street, City, County, State, Zip Code)					
ASSESSOR'S PARCEL NUMBER OR LEGAL DESCRIPTION		DATE PROPERTY WAS FIRST USED BY CLAIMANT			
 Owner and operator: (check applicable book Claimant is:	Owner only Operator of Buildings and improvements lege or seminary of learning under entity? The entity? The entity of learning under entity of learning under entity? The entity of learning under entity of learning under entity? The entity of learning under entity? The entity of learning under entity of learning under entity? The entity of learning under entity of learning under entity of learning under entity of learning under entity? The entity of learning under entity of learning under entity? The entity of learning under entity of learning under entity? The entity of learning under entity of learning under entity of learning under entity? The entity of learning under entity of learning under entity? The entity of learning under entity of learning under entity? The entity of learning under entity of learning under entity of learning under entity? The entity of learning under entity of learning under entity of learning under entity? The entity of learning under entity of learn	and/or the laws of the State the laws of the State the primary	ed on a course of at gy, education, medition?	least two year icine, dentistry	y, engineering ch a separate
BUILDING & IMPROVEMENTS	PRIMARY USE	1	each Assessor's P	arcei Numbe	:
BOILDING & IMI NOVEMENTO	I NIMANI UUL	INCIDEI	TIAL OOL	LEASE	□ OWN
				LEASE	□OWN
				LEASE	□OWN
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THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



EF-264-AH-R12-0516-15000617-2 BOE-264-AH (P2) REV. 12 (05-16)

8. Has any construction commenced and/or been completed on this parcel since 12:01 a.m., January 1 o YES NO If YES , please explain:	of last year?				
8. Is the property, or a portion thereof, for which an exemption is claimed a student bookstore that generates unrelated business taxable income as defined in section 512 of the Internal Revenue Code? YES NO If YES, a copy of the institution's most recent tax return filed with the Internal Revenue Service must accompany this claim. Property taxes as determined by establishing a ratio of the unrelated business taxable income to the bookstore's gross income, will be levied.					
10. Has any of the property listed above been used for business purposes other than a student bookstore YES NO If YES , please explain:	e?				
11. If any business is operated by someone other than the college, attach a copy of the lease or other ag	reement. Please explain:				
12. Is any equipment or other property being leased or rented from someone else? YES NO					
If YES , list on a separate sheet the name and address of the owner and the type, make, model, and serial number of the property. If the property listed is not used exclusively for educational purposes at the collegiate level, please state the other uses of the property. If real property, provide the name and address of the owner.					
The benefit of a property tax exemption must inure to the lessee institution. If taxes paid by the lessor, see section 202.2 of the Revenue and Taxation Code.					
ADDITIONAL REQUIRED DOCUMENTATION					
 Attach a separate page showing the requirements for admission. A current catalog showing the requirements may be substituted. 					
 Attach a separate page, or current catalog, listing the degrees conferred upon the graduates and the requirements for each degree. 					
Attach a copy of the financial statements (balance sheet and operating statement for the pred Whom should we contact during normal business hours for additional					
NAME	TITLE				
DAYTIME TELEPHONE EMAIL ADDRESS					
CERTIFICATION					
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.					
	TITLE				
NAME OF PERSON MAKING CLAIM	DATE				

