EF-264-AH-R13-0522-36000081-1 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.")

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



Chris Wilhite Assessor-Recorder-County Clerk

San Bernardino County Assessor's Office 222 W. Hospitality Lane, 4th Floor San Bernardino, CA 92415-0311 arc.sbcounty.gov Phone: (909) 387-8307

Toll Free: (877) 885-7654

CLAIMANT NAME AND MAILING ADDRESS		F	OR ASSESSO	R'S USE ONLY		
(Make necessary corrections to the printed name	and mailing address)					
Г	I	Received by _	(Assesso	or's designee)		
		of				
			(coul	nty or city)		
L	٦	on		(date)		
If you no longer seek an exemption at this loc	cation, check here Sign and retu	ırn this form to the	e Assessor. Da	te vacated:		
NAME OF CLAIMANT						
TITLE OF CLAIMANT				DAYTIME TELEPHONE NUMBER		
CORPORATE NAME OF THE COLLEGE				,		
ADDRESS (Street, City, County, State, Zip Code)						
ASSESSOR'S PARCEL NUMBER OR LEGAL DESCR	RIPTION		DATE PROPERT	TY WAS FIRST USE	D BY CLAIMANT	
and claims exemption on all Land 2. Does the above institution qualify as a coll YES NO 3. Is the institution conducted as a non-profit YES NO 4. Does the institution require for regular adr YES NO 5. Does the institution confer upon its graduat and sciences, or on a course of at least the veterinary medicine, pharmacy, architecture YES NO 6. Is the property for which the exemption is YES NO	Owner only Operator only Buildings and improvements lege or seminary of learning under the entity? Inission the completion of a four-year less at least one academic or professional studies, sure, fine arts, commerce, or journalist claimed used exclusively for the put	and/or ne laws of the Sta r high school cour onal degree, base ch as law, theolog n?	rse or its equivand on a course or gy, education, m	ellent? f at least two yean nedicine, dentistr	y, engineering,	
 List all buildings and other improvements to sheet if necessary. Indicate whether lease 						
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDEN	TAL USE			
				LEASE	OWN	
				LEASE	\square OWN	
				LEASE	\square OWN	
				LEASE	\square OWN	
				LEASE	\square OWN	
				LEASE	\square OWN	

DATE



NAME OF PERSON MAKING CLAIM