EF-264-AH-R13-0522-16000134-1 BOE-264-AH (P1) REV. 13 (05-22)

COLLEGE EXEMPTION CLAIM

Kings County Assessor 1400 W. Lacey Blvd. Hanford, CA 93230

Kristine Lee

559-852-2486 Fax: 559-582-2794

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.		
CLAIMANT NAME AND MAILING ADDRESS	FOR ASSESSOR'S USE ONLY	
(Make necessary corrections to the printed name and mailing address)	Received by _	
		(Assessor's designee)
	of	
		(county or city)
L	on	(date)
If you no longer seek an exemption at this location, check here $\ igsquare$ Sign and retu	ırn this form to the	Assessor. Date 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 DESCRIPTION		DATE PROPERTY WAS FIRST USED BY CLAIMANT
Owner and operator: (check applicable boxes) Claimant is: □ Owner and operator □ Owner only □ Operator only and claims exemption on all □ Land □ Buildings and improvements Does the above institution qualify as a college or seminary of learning under the content of the	and/or 🔲 F	Personal property e of California?
☐ YES ☐ NO		
3. Is the institution conducted as a non-profit entity? YES NO		
Does the institution require for regular admission the completion of a four-year YES NO	high school cours	se or its equivalent?
5. Does the institution confer upon its graduates at least one academic or profession and sciences, or on a course of at least three years in professional studies, su veterinary medicine, pharmacy, architecture, fine arts, commerce, or journalism YES NO	ch as law, theolog	
6. Is the property for which the exemption is claimed used exclusively for the pu	irnoses of education	on?
YES NO	p3000 or oddodin	
7. List all buildings and other improvements for which exemption is claimed and sheet if necessary. Indicate whether leased or owned. Please use a separate		

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

INCIDENTAL USE

LEASE

LEASE

 \square LEASE

LEASE

LEASE

 \square OWN

PRIMARY USE



BUILDING & IMPROVEMENTS

TITLE

DATE



NAME OF PERSON MAKING CLAIM