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.")



Claude Parrish

Orange County Assessor 500 S. Main Street, First Floor, Suite 103 Orange, CA 92868-4512

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or P.O. Box 628 Santa Ana, CA 92702-0628 (714) 834-2779 www.ocassessor.gov

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

	CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name ar	nd mailing address)							
	Г	Г		FC	R ASSESSO	DR'S L	JSE ONLY	,	
				Received by _					
					(Asses:	sor's desig	gnee)		
				of	(co	unty or cit	<i>y</i>)		
	L			on					
						(date)			
NAI	ME OF CLAIMANT								
TIT	LE OF CLAIMANT					DAYTI (IME TELEPH	ONE N	IUMBER
CO	RPORATE NAME OF THE COLLEGE						,		
ADI	DRESS (Street, City, County, State, Zip Code)								
AS	SESSOR'S PARCEL NUMBER OR LEGAL DESCRIF	PTION			DATE PROPER	TY WAS	FIRST USE	D BY C	CLAIMANT
(Owner and operator: <i>(check applicable boxe</i> Claimant is: Owner and operator and claims exemption on all Land		-	and/or 🔲 F	Personal prop	erty			
2.	Does the above institution qualify as a colleg		he			-			
3. I	s the institution conducted as a non-profit e	ntity?							
4. I	Does the institution require for regular admis	ssion the completion of a four-year	r hi	gh school cours	se or its equiv	alent?			
á	Does the institution confer upon its graduates and sciences, or on a course of at least thre veterinary medicine, pharmacy, architecture YES NO	e years in professional studies, su	ich						
6. I	s the property for which the exemption is cla	aimed used exclusively for the pu	urp	oses of education	on?				
	YES NO								
	ist all buildings and other improvements for heet if necessary. Indicate whether leased of								eparate
[BUILDING & IMPROVEMENTS	PRIMARY USE		INCIDEN	TAL USE				
							LEASE		OWN
							LEASE		OWN
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THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



8. Has any construction commenced and/or been completed on this parcel since 12:01 a.m., January 1 YES NO If YES , please explain:	of last year?							
 9. 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 booksto YES NO If YES , please explain:	pre?							
11. If any business is operated by someone other than the college, attach a copy of the lease or other a	agreement. 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 preceding fiscal year.) 								
Whom should we contact during normal business hours for additional information?								
NAME	TITLE							
DAYTIME TELEPHONE EMAIL ADDRESS	<u> </u>							

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.

SIGNATURE OF PERSON MAKING CLAIM	TITLE
NAME OF PERSON MAKING CLAIM	DATE

