	OF	Sendy Perez
–262–АН–R08–0514–11000713–1)Е-262-АН (Р1) REV. 08 (05-14)		Glenn County Assessor/Clerk/Recorde 516 W. SYCAMORE ST., 2ND FLOOR WILLOWS, CA 95988
CHURCH EXEMPTION PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP	A MARK	Phone: (530) 934-6402 FAX: (530) 934-6571
This claim is filed for fiscal year 20 20 (Example: a person filing a timely claim in January 2011 we enter "2011-2012.")	ould	
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)	7	FOR ASSESSOR'S USE ONLY
		Received
		Approved
		Denied Reason for denial
L	1	
To receive the full exemption, this clain	n must be filed with t	the Assessor by February 15.
NAME OF CHURCH, ORGANIZATION, ETC.		
NAME OF CHURCH, ORGANIZATION, ETC.		
WEBSITE ADDRESS (IF ANY)		
MAILING ADDRESS (NUMBER AND STREET/P. O. BOX)		
CITY, STATE, ZIP CODE		
ADDRESS OF PROPERTY (NUMBER AND STREET)		ASSESSOR'S PARCEL NUMBER
CITY, COUNTY, ZIP CODE		DATE PROPERTY WAS FIRST USED BY CLAIMANT
 Owner and operator: (check applicable boxes) Claimant is: Owner and operator Owner only and claims exemption on all I Land Buildings and ir Second Seco	mprovements and/or	Personal property uding any building in the course of construction?
 Is the land claimed as exempt required for the convenient use of 	of these buildings?	
☐ Yes ☐ No		
 Is all real property used by the church upon which exemption parking of automobiles of persons attending or engaged in re commercial purposes? 		
Yes No		
Commercial purposes does not include the parking of vehicles costs of operating and maintaining the property for parking purp if the congregation of the church, religious congregation, or sec	oses. Leased property us	sed for parking purposes is eligible for exemption only
5. List all uses of the property:		
6. a. Is an elementary school and/or secondary school being oper ☐ Yes ☐ No	rated at this location?	
	n (a abildran'a day aara a	enter includes licensed pursery schools, preschools
b. Is a children's day care center being operated at this locatio and infant care centers)?	in (a children's day care c	ienter includes licensed hursery schools, preschools,
Yes No	rible for the Church Every	tion. If the property is both sweed and exercised by the
Note: If the answer is YES to a. or b. above, the property is not elig church and used for religious worship, preschool purposes, nursery grade (grades 1 - 12), or for the purposes of both schools of collegia Religious Exemption. The Religious Exemption has a "one-time f claimant may wish instead to annually file by February 15 for the We	v school purposes, kinderga te grade and schools of les iling" provision and should	arten purposes, school purposes of less than collegiate s than collegiate grade, the claimant may qualify for the

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



7. Is the real property listed on this claim owned by the church?

Yes No If NO, state the name and address of owner:

OWNER NAME				
MAILING ADDRESS (NUMBER A	ND STREET/P. O. BOX)	CI	TY, STATE, ZIP CODE	
Yes No If YES, is Yes Yes Note: The benefit of a prothat the church exemption payments, or a refund of su	n is taken into account in fixing the	reof, so used is not eligib church; if the lease or terms of agreement, th of occupancy (or use), or	le for exemption. rental agreement does not specifically prov le church shall receive a reduction in re portion thereof, during the fiscal year equa	ntal
9. Are bingo games being ope		or the Welfare Exemption	must be filed with the Assessor by February	/ 15
10. Is any portion of this prope	rty being used for living quarters for any	person? If YES, describe	that portion:	
Note: Living quarters are r Exemption. Contact the Ass		Exemptions. Certain livit	ng quarters may be exempt under the Wel	fare
11. Is any portion of this proper	-			
12. Has any portion of this prop since 12:01 a.m., January		ed and/or operated by sor	ne person or organization other than the claim	ant
Yes No If YES, de	escribe:			
If property is leased to anoth CHURCH NAME	ner church, provide the name and mailing	g address:		
MAILING ADDRESS (NUMBER A	ND STREET/P. O. BOX)	CI	IY, STATE, ZIP CODE	
	ers (except for worship only) is not eligible claim for the Welfare Exemption. Contact		on. It may be exempt if the claimant (owner)	and
•	ge in the use of the property or any cons 1 last year?		d/or completed on this property	
Yes No If YES, lis		d the type, make, model,	e? and serial number of the property. If the prop s of the property (<i>attach schedule as necessa</i>	
Whon	n should we contact during normal	business hours for ad	ditional information?	
NAME			TITLE	
DAYTIME TELEPHONE	EMAIL ADDRESS		1	
<u> </u>	CERTIF	ICATION		
I certify (or declare) under pen	alty of perjury under the laws of the State	e of California that the for	egoing 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

 NAME OF PERSON MAKING CLAIM

 DATE

