62-AH-R11-0522-08000145-1 BOE-262-AH (P1) REV. 11 (05-22) CHURCH EXEMPTION PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP		Jennifer Perry, Assessor County of Del Norte 981 H Street, Suite 120 Crescent City, CA 95531 Telephone: (707) 464-7200
This claim is filed for fiscal year 20 20 (Example: a person filing a timely claim in January 2011 would enter "2011-2012.")		
NAME AND MAILING ADDRESS		
(Make necessary corrections to the printed name and mailing address)	7	FOR ASSESSOR'S USE ONLY
	,	
		Received
		Denied
		Reason for denial
L		
To receive the full exemption, this claim m If you no longer seek an exemption at this location, check h 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 CLAIMAN
Claimant is: Owner and operator Owner only and claims exemption on all Land Buildings and 2. Are all buildings and equipment claimed as exempt used solel Yes No 3. Is the land claimed as exempt required for the convenient use Yes No 4. Is all real property used by the church upon which exemption parking of automobiles of persons attending or engaged in r commercial purposes? Yes No <i>Commercial purposes</i> does not include the parking of vehicles costs of operating and maintaining the property for parking pur if the congregation of the church, religious congregation, or se 5. List all uses of the property:	improvements and/ y for religious worship, of these buildings? n is claimed for parkin religious worship or rel s or bicycles, the revent poses. Leased propert	including any building in the course of construction? g purposes necessarily and reasonably required for t igious activity, and which is not at other times used ue of which does not exceed the ordinary and necessary y used for parking purposes is eligible for exemption o
 6. a. Is an elementary school and/or secondary school being ope Yes No b. Is a children's day care center being operated at this locati and infant care centers)? Yes No Note: If the answer is YES to a. or b. above, the property is not e church and used for religious worship, preschool purposes, nurse grade (grades 1 - 12) or for the purposes of both schools of college 	on (a children's day ca eligible for the Church Exert ary school purposes, kind	cemption. If the property is both owned and operated by

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7. Is the real property listed on this claim owned by the church? \Box Yes \Box	No If NO, state the name and address	of owner:
OWNER NAME		
MAILING ADDRESS (NUMBER AND STREET/P. O. BOX)	CITY, STATE, ZIP CODE	
8. Is leased property, if any, used by the church for parking purposes? ☐ Yes ☐ No If YES, is the congregation of the church, religious deno ☐ Yes ☐ No If YES, the property, or portion thereof, s	-	bers?
Note: The benefit of a property tax exemption must inure to the church; specifically provide that the church exemption is taken into account in fixir rental payments, or a refund of such payments, if paid, for each month of or one-twelfth of the property taxes not paid during such fiscal year by reason lease or rental agreement.	ng the terms of agreement, the church s ccupancy (or use), or portion thereof, dur	hall receive a reduction in ing the fiscal year equal to
Are bingo games being operated on this property? If YES, a claim for the each year for the property, or portion of the property so used, to be exempt		Assessor by February 15
10. Is any portion of this property being used for living quarters for any person	n? If YES, describe that portion: 🗌 Yes	🗌 No
Note: Living quarters are not eligible for the Church or Religious Exem Exemption. Contact the Assessor.	ptions. Certain living quarters may be e	exempt under the vveitare
Exemption. Contact the Assessor.	ptions. Certain living quarters may be e	exempt under the weirare
Exemption. Contact the Assessor. 11. Is any portion of this property vacant and/or unused? Yes No If YES, describe that portion:		
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Whom should we contact during normal business hours for additional information?

NAME		TITLE		
DAYTIME TELEPHONE	EMAIL ADDRESS			
()				
CERTIFICATION				
	rjury under the laws of the State of California that the foregoing nts or documents, is true, correct, and complete to the best of n			
SIGNATURE OF PERSON MAKING CLAIM		TITLE		
NAME OF PERSON MAKING CLAIM		DATE		

