		Received Approved Denied	•
ption, this cla an exemption	_ iim must be filed v	Received Approved Denied Reason fo with the Assessor by Fe Sign and return this fo	ebruary 15.
ption, this cla an exemption	_ iim must be filed v	Received Approved Denied Reason fo with the Assessor by Fe Sign and return this fo	ebruary 15.
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X)		ASSESSOR'S PAR	
		ASSESSOR'S PAR	
		ASSESSOR'S PAR	
			CEL NUMBER
		DATE PROPERTY	WAS FIRST USED BY CLAIMANT
☐ Buildings and exempt used sole ne convenient use n which exemptio g or engaged in parking of vehicle erty for parking pu	ely for religious worship e of these buildings? ion is claimed for park religious worship or r	religious activity, and which i enue of which does not excee erty used for parking purpose	
rated at this locat he property is not pol purposes, nurs oth schools of colle has a "one-time fi	t eligible for the Church sery school purposes, k egiate grade and school filing" provision and shou	care center includes licensed Exemption. If the property is b kindergarten purposes, school p ils of less than collegiate grade,	I nursery schools, preschools, ooth owned and operated by the purposes of less than collegiate the claimant may qualify for the ntact the Assessor. The claimant
y school being op rated at this locat he property is not pol purposes, nurs	berated at this location tion (a children's day of teligible for the Church sery school purposes, k egiate grade and schools filing" provision and shou Exemption.	500 members. 1? care center incl Exemption. If th kindergarten purp Is of less than co	udes licensed poperty is b poses, school vllegiate grade, ebruary 15; con

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> 7 le the real property listed a thi -1-: IS NIC

7. Is the real property listed on this claim	owned by the church?	es 🗌 No If NO, stat	e the name and address of	owner:
OWNER NAME				
MAILING ADDRESS (NUMBER AND STREET	/P. O. BOX)		CITY, STATE, ZIP CODE	
	hurch for parking purposes? egation of the church, religiou S, the property, or portion the			rs?
Note: The benefit of a property tax ex specifically provide that the church exerental payments, or a refund of such pa one-twelfth of the property taxes not pa lease or rental agreement.	mption is taken into account yments, if paid, for each mon	in fixing the terms of th of occupancy (or us	agreement, the church shal e), or portion thereof, during	Il receive a reduction in the fiscal year equal to
9. Are bingo games being operated on th each year for the property, or portion of				ssessor by February 15
10. Is any portion of this property being us	sed for living quarters for any	person? If YES, desc	ribe that portion: 🗌 Yes 🗌] No
Note: Living quarters are not eligible Exemption. Contact the Assessor.	for the Church or Religious	Exemptions. Certain	living quarters may be exe	mpt under the Welfare
11. Is any portion of this property vacant a If YES, describe that portion:	Ind/or unused? 🗌 Yes 🗌	No		
12. Has any portion of this property been residue a since 12:01 a.m., January 1 last year?		ed and/or operated by	some person or organizatior	ו other than the claimant
a. If property is leased to another chur CHURCH NAME	ch, provide the name and ma	ailing address:		
MAILING ADDRESS (NUMBER AND STREET	/P. O. BOX)		CITY, STATE, ZIP CODE	
 b. If property is leased to an organizat sheets if necessary. 	ion other than a church, prov	ide the name, type of	organization and frequency	of use; attach additional
NAME			TYPE	FREQUENCY
NAME			ТҮРЕ	FREQUENCY
Note: Property used by others (except the user/operator both file a claim for th 13. Has there been any change in the us since 12:01 a.m., January 1 last year?	e Welfare Exemption. Conta se of the property or any con	ct the Assessor. Istruction commenced		
	this location being leased or and address of the owner an lusively for religious worship,	d the type, make, mod	lel, and serial number of the	
	we contact during normal	business hours for		
NAME			TITLE	
DAYTIME TELEPHONE ()	EMAIL ADDRESS			
		FICATION		
I certify (or declare) under penalty of peri-	invited and the laws of the Stat	te of California that the	foregoing and all informatic	n hereon including any

tify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including a 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

