	OF	Sendy Perez
-262-АН-R08-0514-11000789-1 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	Reading	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 w enter "2011-2012.")	<i>r</i> ould	
NAME AND MAILING ADDRESS		
(Make necessary corrections to the printed name and mailing address)	Г	FOR ASSESSOR'S USE ONLY
		Received
		Approved
		Denied
		Reason for denial
L		
To receive the full exemption, this clair	n must be filed with	the Assessor by February 15.
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 □ Land □ Buildings and i Are all buildings and equipment claimed as exempt used solely Yes □ No 	improvements and/or	,
 Is the land claimed as exempt required for the convenient use 	of these buildings?	
Yes No	er andere semaninger	
 4. 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 pur if the congregation of the church, religious congregation, or see	poses. Leased property u	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 ope	rated at this location?	
Yes No		
b. Is a children's day care center being operated at this location and infant care centers)?	on (a children's day care o	center includes licensed nursery schools, preschools,
Note : If the answer is YES to a. or b. above, the property is not eli church and used for religious worship, preschool purposes, nursen grade (grades 1 - 12), or for the purposes of both schools of collegia	y school purposes, kinderg	arten purposes, school purposes of less than collegiate
Religious Exemption. The Religious Exemption has a "one-time claimant may wish instead to annually file by February 15 for the We	filing" provision and shoul	d be filed by February 15; contact the Assessor. 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:

	the name and address of owner.	
MAILING ADDRESS (NUMBER AN	D STREET/P. O. BOX)	CITY, STATE, ZIP CODE
Yes No If YES, is t	d by the church for parking purposes? the congregation of the church, religious do No If YES, the property, or portion thereof	enomination, or sect greater than 500 members? f, so used is not eligible for exemption.
that the church exemption payments, or a refund of suc	is taken into account in fixing the terr	urch; if the lease or rental agreement does not specifically proving ns of agreement, the church shall receive a reduction in re ccupancy (or use), or portion thereof, during the fiscal year equa son of the Church Exemption.
each year for the property, or Yes No	portion of the property so used, to be exen	
Yes No	y being used for living quarters for any per-	son? If YES, describe that portion:
		emptions. Certain living quarters may be exempt under the Wel
11. Is any portion of this property		
	scribe that portion:	
since 12:01 a.m., January 1		and/or operated by some person or organization other than the claim
Yes No If YES, des	cribe:	
If property is leased to anothe	er church, provide the name and mailing ac	Idress:
CHURCH NAME		
MAILING ADDRESS (NUMBER AN	D STREET/P. O. BOX)	CITY, STATE, ZIP CODE
	s (except for worship only) is not eligible fo laim for the Welfare Exemption. Contact th	r the Church Exemption. It may be exempt if the claimant (owner)
•		ction commenced and/or completed on this property
since 12:01 a.m., January 1		
Yes No If YES, des	cribe:	
14. Is any equipment or other pr	operty at this location being leased or rent	ed from someone else?
Yes No If YES, list 1	the name and address of the owner and the	e type, make, model, and serial number of the property. If the prop ase state the other uses of the property (attach schedule as necessa
Whom	should we contact during normal bus	siness hours for additional information?
NAME		
DAYTIME TELEPHONE	EMAIL ADDRESS	
()		
	CERTIFIC	ATION
l certify (or declare) under penal	ty of perjury under the laws of the State of	California that the foregoing and all information hereon, including

 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

