EF-262-AH-R10-0519-21000536-1

BOE-262-AH (P1) REV. 10 (05-19)

CHURCH EXEMPTION

PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP

This claim is (Example: a enter "2011-

m is filed for fiscal year 20 20	
: a person filing a timely claim in January 2011 would	
, , ,	
11-2012.")	
NAME AND MAILING ADDRESS	
(Make necessary corrections to the printed name and mailing address)	
(wake necessary corrections to the printed name and maining address)	
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SHELLY SCOTT ASSESSOR-RECORDER-COUNTY CLERK

EXEMPTIONS DIVISION PO Box C, Civic Center Branch San Rafael, CA 94913 PH (415) 473-3794 FAX (415) 473-6542 www.marincounty.gov

(Make necessary corrections to the printed name a	nd mailing address)	
Г	٦	FOR ASSESSOR'S USE ONLY
		Received
		Approved
		Denied
		Reason for denial
L		
	nption, this claim must be filed with the k an exemption at this location. Sign an	-
WEBSITE ADDRESS (IF ANY)		
MAILING ADDRESS (NUMBER AND STREET/P. O. BO	OX)	
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
 Yes □ No 3. Is the land claimed as exempt required for the land claimed la	exempt used solely for religious worship, includir	oses necessarily and reasonably required for the activity, and which is not at other times used for the control of the control
6. a. Is an elementary school and/or secondar	ry school being operated at this location?	
☐ Yes ☐ No		
b. Is a children's day care center being operand infant care centers)?	erated at this location (a children's day care cente	er includes licensed nursery schools, preschools
☐ Yes ☐ No		
church and used for religious worship, presch grade (grades 1 - 12), or for the purposes of b	the property is not eligible for the Church Exemption nool purposes, nursery school purposes, kindergarte toth schools of collegiate grade and schools of less that has a "one-time filing" provision and should be filed 15 for the Welfare Exemption.	en purposes, school purposes of less than collegiat han collegiate grade, the claimant may qualify for th



7. Is the real property listed or	this claim owned by the church?	☐ No If NO, state the name	and address of owner:		
OWNER NAME					
MAILING ADDRESS (NUMBER A	AND STREET/P. O. BOX)	CITY, STATE	E, ZIP CODE		
Yes No If YES, i	Is leased property, if any, used by the church for parking purposes? Yes No If YES, is the congregation of the church, religious denomination, or sect greater than 500 members? Yes No If YES, the property, or portion thereof, so used is not eligible for exemption.				
specifically provide that the rental payments, or a refund	perty tax exemption must inure to the church church exemption is taken into account in fix I of such payments, if paid, for each month of axes not paid during such fiscal year by reaso	king the terms of agreement, occupancy (or use), or portio	, the church shall receive a reduction in in thereof, during the fiscal year equal to		
	erated on this property? If YES, a claim for the property so used, to be exem		e filed with the Assessor by February 15		
10. Is any portion of this prope	erty being used for living quarters for any pers	on? If YES, describe that por	rtion: Yes No		
Note: Living quarters are Exemption. Contact the Ass	not eligible for the Church or Religious Exe sessor.	mptions. Certain living quart	ters may be exempt under the Welfare		
11. Is any portion of this prope If YES, describe that portion	erty vacant and/or unused?				
12. Has any portion of this propsince 12:01 a.m., January	perty been rented to, leased to, or been used an 1 last year?	nd/or operated by some perso	on or organization other than the claimant		
a. If property is leased to a CHURCH NAME	nother church, provide the name and mailing	address:			
MAILING ADDRESS (NUMBER A	AND STREET/P. O. BOX)	CITY, STATE	E, ZIP CODE		
	n organization other than a church, provide th	e name, type of organization	n and frequency of use; attach additional		
sheets if necessary. NAME		TYPE	FREQUENCY		
NAME		TVDE	FREQUENCY		
NAME		ITTPE	TYPE FREQUENCY		
the user/operator both file a 13. Has there been any changes since 12:01 a.m., January 14. Is any equipment or other Yes No If YES, lis	ers (except for worship only) is not eligible for claim for the Welfare Exemption. Contact the ge in the use of the property or any construct last year? Yes No If YES, described property at this location being leased or rentest the name and address of the owner and the ot used exclusively for religious worship, please	e Assessor. etion commenced and/or come: ed from someone else? e type, make, model, and seri	npleted on this property al number of the property. If the property		
W/s			Linformation 2		
NAME	m should we contact during normal bus	iness nours for additiona	TITLE		
DAYTIME TELEPHONE	EMAIL ADDRESS				
()	EMAIL ADDRESS				
	CERTIFICA	ATION			
accompanyin	alty of perjury under the laws of the State of (g statements or documents, is true, correct, a				
SIGNATURE OF PERSON MAKING CLAI	М		TITLE		
NAME OF PERSON MAKING CLAIM			DATE		

