CHURCH EXEMPTION

PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP

This claim is filed for fiscal year 20 20 (Example: a person filing a timely claim in January 201 enter "2011-2012.")	1 would		
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing	address)		
Г	7	FOR ASSESSOR'S USE ONLY	
		Received	
		Approved	
		Denied	
		Reason for denial	
L	_		
	is claim must be filed with the Assesso	-	
If you no longer seek an exemption at this location	on, check here Sign and return this for	m to the Assessor. Date vacated:	
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	
1. Owner and operator: (check applicable boxes) Claimant is:	wenient use of these buildings? The exemption is claimed for parking purpose ngaged in religious worship or religious actions of the parking purposes. The exemption is claimed for parking purpose ngaged in religious worship or religious actions of the parking purposes. Leased property used for parking purposes. Leased property used for	es necessarily and reasonably required for the tivity, and which is not at other times used for the ch does not exceed the ordinary and necessary parking purposes is eligible for exemption only	
6. a. Is an elementary school and/or secondary school	ol being operated at this location?		
Yes No			
b. Is a children's day care center being operated a and infant care centers)?	at this location (a children's day care center	includes licensed nursery schools, preschools,	
☐ Yes ☐ No			
Note: If the answer is YES to a. or b. above, the pro- church and used for religious worship, preschool pur grade (grades 1 - 12), or for the purposes of both scho- Religious Exemption. The Religious Exemption has a may wish instead to annually file by February 15 for the	poses, nursery school purposes, kindergarten ools of collegiate grade and schools of less tha "one-time filing" provision and should be filed b	purposes, school purposes of less than collegiate n collegiate grade, the claimant may qualify for the	

7. Is the real property listed on this clair	m owned by the church? $\ \ \square$ Yes $\ \ \ $	☐ No If NO, state the name	and address of owner:	
OWNER NAME				
MAILING ADDRESS (NUMBER AND STREET/P. O. BOX)		CITY, STATE	CITY, STATE, ZIP CODE	
	e church for parking purposes? gregation of the church, religious de /ES, the property, or portion thereof			
specifically provide that the church e rental payments, or a refund of such	xemption is taken into account in fix payments, if paid, for each month of	xing the terms of agreement, occupancy (or use), or portion	ment for any leased property does not the church shall receive a reduction in n thereof, during the fiscal year equal to The assessor may request a copy of the	
Are bingo games being operated on each year for the property, or portion			e filed with the Assessor by February 15	
10. Is any portion of this property being	used for living quarters for any pers	on? If YES, describe that por	tion: Yes No	
Note: Living quarters are not eligib Exemption. Contact the Assessor. 11. Is any portion of this property vacan	-	mptions. Certain living quart	ers may be exempt under the Welfare	
If YES, describe that portion:				
12. Has any portion of this property beer since 12:01 a.m., January 1 last year		nd/or operated by some perso	n or organization other than the claimant	
a. If property is leased to another ch CHURCH NAME	urch, provide the name and mailing	address:		
MAILING ADDRESS (NUMBER AND STREET/P. O. BOX) CITY, STATE, ZIP CODE		, ZIP CODE		
b. If property is leased to an organiz sheets if necessary.	ation other than a church, provide th	ne name, type of organization	and frequency of use; attach additional	
NAME		TYPE	FREQUENCY	
NAME		TYPE	TYPE FREQUENCY	
13. Has there been any change in the since 12:01 a.m., January 1 last year	, , , ,		pleted on this property	
	ne and address of the owner and the	type, make, model, and seria	al number of the property. If the property oroperty (attach schedule as necessary):	
Whom should	d we contact during normal bus	iness hours for additional	information?	
NAME			TITLE	
DAYTIME TELEPHONE	EMAIL ADDRESS			
()	CERTIFICA	ATION		
		California that the foregoing a	and all information hereon, including any y knowledge and belief.	
SIGNATURE OF PERSON MAKING CLAIM			TITLE	
NAME OF PERSON MAKING CLAIM				