s claim is filed for fiscal year 20 20 ample: a person filing a timely claim in January 2011 would ar "2011-2012.") NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address) To receive the full exemption, this claim must be fil rou no longer seek an exemption at this location, check here Sig ME OF CHURCH, ORGANIZATION, ETC. BSITE ADDRESS (IF ANY) LING ADDRESS (NUMBER AND STREET/P. O. BOX) Y, STATE, ZIP CODE DRESS OF PROPERTY (NUMBER AND STREET) Y, COUNTY, ZIP CODE		
(Make necessary corrections to the printed name and mailing address)	_ led with the Assesso	Received
L         To receive the full exemption, this claim must be fill         rou no longer seek an exemption at this location, check here Signed         ME OF CHURCH, ORGANIZATION, ETC.         BSITE ADDRESS (IF ANY)         LING ADDRESS (NUMBER AND STREET/P. O. BOX)         Y, STATE, ZIP CODE         DRESS OF PROPERTY (NUMBER AND STREET)	_ led with the Assesso	Received
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ME OF CHURCH, ORGANIZATION, ETC. BSITE ADDRESS (IF ANY) LING ADDRESS (NUMBER AND STREET/P. O. BOX) Y, STATE, ZIP CODE DRESS OF PROPERTY (NUMBER AND STREET)	gn and return this for	m to the Assessor. Date vacated:
BSITE ADDRESS (IF ANY) LING ADDRESS (NUMBER AND STREET/P. O. BOX) Y, STATE, ZIP CODE DRESS OF PROPERTY (NUMBER AND STREET)		
LING ADDRESS (NUMBER AND STREET/P. O. BOX) Y, STATE, ZIP CODE DRESS OF PROPERTY (NUMBER AND STREET)		
Y, STATE, ZIP CODE DRESS OF PROPERTY (NUMBER AND STREET)		
DRESS OF PROPERTY (NUMBER AND STREET)		
Y, COUNTY, ZIP CODE		ASSESSOR'S PARCEL NUMBER
		DATE PROPERTY WAS FIRST USED BY CLAIMANT
Claimant is: Owner and operator Owner only Operat and claims exemption on all Land Buildings and improvem we all buildings and equipment claimed as exempt used solely for religi Yes No s the land claimed as exempt required for the convenient use of these to Yes No s all real property used by the church upon which exemption is claim warking of automobiles of persons attending or engaged in religious w commercial purposes? Yes No Commercial purposes does not include the parking of vehicles or bicycle	nents and/or ious worship, including buildings? ned for parking purpose worship or religious act	es necessarily and reasonably required for the tivity, and which is not at other times used for
costs of operating and maintaining the property for parking purposes. Le f the congregation of the church, religious congregation, or sect is no gr	eased property used for	parking purposes is eligible for exemption only
ist all uses of the property:		
a. Is an elementary school and/or secondary school being operated at th	his location?	
Yes No		
b. Is a children's day care center being operated at this location (a child and infant care centers)?	dren's day care center	includes licensed nursery schools, preschools,
Yes No		
<b>Note</b> : If the answer is YES to a. or b. above, the property is not eligible for church and used for religious worship, preschool purposes, nursery school grade (grades 1 - 12), or for the purposes of both schools of collegiate grade Religious Exemption. The Religious Exemption has a "one-time filing" provis nay wish instead to annually file by February 15 for the Welfare Exemption.	purposes, kindergarten and schools of less thar	purposes, school purposes of less than collegiate n collegiate grade, the claimant may qualify for the
THIS DOCUMENT IS SUBJECT		
		ECTION

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7. Is the real property listed on this claim owned by the church? $\hfill Tes \hfill N$	o If NO, state the name and addre	ss 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?	-	embers?
<b>Note:</b> The benefit of a property tax exemption must inure to the church; if specifically provide that the church exemption is taken into account in fixing rental payments, or a refund of such payments, if paid, for each month of occ one-twelfth of the property taxes not paid during such fiscal year by reason o lease or rental agreement.	the terms of agreement, the church upancy (or use), or portion thereof, o	shall receive a reduction in luring the fiscal year equal to
<ol><li>Are bingo games being operated on this property? If YES, a claim for the W each year for the property, or portion of the property so used, to be exempt.</li></ol>		the Assessor by February 1
10. Is any portion of this property being used for living quarters for any person?	P If YES, describe that portion:	es 🗌 No
<b>Note:</b> Living quarters are not eligible for the Church or Religious Exempt Exemption. Contact the Assessor.	tions. Certain living quarters may b	e exempt under the Welfare
11. Is any portion of this property vacant and/or unused?  Yes No If YES, describe that portion:		
12. Has any portion of this property been rented to, leased to, or been used and/o since 12:01 a.m., January 1 last year? ☐ Yes ☐ No	or operated by some person or organi	zation other than the claiman
a. If property is leased to another church, provide the name and mailing add $\overline{\rm CHURCH}$ NAME		
	CITY, STATE, ZIP CODE	
CHURCH NAME	CITY, STATE, ZIP CODE	ency of use; attach additiona
CHURCH NAME MAILING ADDRESS (NUMBER AND STREET/P. O. BOX) b. If property is leased to an organization other than a church, provide the n	CITY, STATE, ZIP CODE	ency of use; attach additiona
CHURCH NAME MAILING ADDRESS (NUMBER AND STREET/P. O. BOX) b. If property is leased to an organization other than a church, provide the r sheets if necessary.	CITY, STATE, ZIP CODE name, type of organization and freque	

Is any equipment or other property at this location being leased or rented from someone else? Yes No If YES, list the name and address of the owner and the type, make, model, and serial number of the property. If the property listed is not used exclusively for religious worship, please state the other uses of the property (*attach schedule as necessary*):

## Whom should we contact during normal business hours for additional information?

NAME		TITLE
DAYTIME TELEPHONE	EMAIL ADDRESS	
	CERTIFICATIO	DN
	enalty of perjury under the laws of the State of Calif ing statements or documents, is true, correct, and c	ornia that the foregoing and all information hereon, including any omplete to the best of my knowledge and belief.
SIGNATURE OF PERSON MAKING CL	АІМ	TITLE
NAME OF PERSON MAKING CLAIM		DATE

