EF-262-AH-R08-0514-22000251-1 BOE-262-AH (P1) REV. 08 (05-14)



Becky Crafts County of Mariposa Assessor/Recorder

P.O. Box 35 Mariposa, CA 95338 Ph: (209) 966-2332

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 2011 would enter "2011-2012.")	
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)	FOR ASSESSOR'S USE ONLY
	Received
	Approved
	Denied Reason for denial
	Neason for defilar
To receive the full exemption, this claim must be filed with the A	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
Claimant is:	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 or parking purposes is eligible for exemption only
6. a. Is an elementary school and/or secondary school being operated at this location? Yes No b. Is a children's day care center being operated at this location (a children's day care center and infant care centers)? Yes No Note: If the answer is YES to a. or b. above, the property is not eligible for the Church Exemption. church and used for religious worship, preschool purposes, nursery school purposes, kindergarten grade (grades 1 - 12), or for the purposes of both schools of collegiate grade and schools of less that Religious Exemption. The Religious Exemption has a "one-time filing" provision and should be claimant may wish instead to annually file by February 15 for the Welfare Exemption.	If the property is both owned and operated by the purposes, school purposes of less than collegiate in collegiate grade, the claimant may qualify for the

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



7. Is the real property listed on this	s claim owned by the church? se name and address 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?			
	e congregation of the church, religious denomin	ation, or sect gre	eater than 500 members?	
☐ Yes ☐ N	o If YES, the property, or portion thereof, so us	ed is not eligible	for exemption.	
that the church exemption is payments, or a refund of such	ty tax exemption must inure to the church; if is taken into account in fixing the terms of a payments, if paid, for each month of occupan is not paid during such fiscal year by reason of the	agreement, the cy (or use), or p	church shall receive a reduction in rental portion thereof, during the fiscal year equal to	
	ed on this property? If YES, a claim for the Welfa ortion of the property so used, to be exempt.	are Exemption n	nust be filed with the Assessor by February 15	
10. Is any portion of this property Yes No	being used for living quarters for any person? If	YES, describe the	nat portion:	
Exemption. Contact the Assess		ns. Certain living	quarters may be exempt under the Welfare	
11. Is any portion of this property				
Yes No If YES, desc	ribe that portion:			
12. Has any portion of this property since 12:01 a.m., January 1 la	been rented to, leased to, or been used and/or ost year?	perated by some	e person or organization other than the claimant	
Yes No If YES, descr	ribe:			
If property is leased to another CHURCH NAME	church, provide the name and mailing address:			
MAILING ADDRESS (NUMBER AND STREET/P. O. BOX)		CITY	CITY, STATE, ZIP CODE	
Note: Property used by others of the user/operator both file a cla	(except for worship only) is not eligible for the Clim for the Welfare Exemption. Contact the Asses	nurch Exemptior	n. It may be exempt if the claimant (owner) and	
13. Has there been any change is since 12:01 a.m., January 1 la	•	ommenced and/o	or completed on this property	
res no il res, desci	ise.			
	perty at this location being leased or rented from			
	e name and address of the owner and the type, sed exclusively for religious worship, please state			
Whom s	hould we contact during normal business	hours for add	itional information?	
NAME			TITLE	
DAYTIME TELEPHONE	EMAIL ADDRESS		I	
()				
	CERTIFICATION	l		
	of perjury under the laws of the State of Californatements or documents, is true, correct, and cor			
SIGNATURE OF PERSON MAKING CLAIM			TITLE	
NAME OF PERSON MAKING CLAIM			DATE	
			1	

