EF-262-AH-R07-0512-33000587-1 BOE-262-AH (P1) REV. 07 (05-12)

CHURCH EXEMPTION PROPERTY USED SOLELY FOR RELIGIOUS WORSHII



Larry W. Ward Assessor-County Clerk-Recorder

County of Riverside PO Box 751 Riverside, CA 92502-0751 Phone: (951) 955-6200 https://www.asrclkrec.com/

ERTY USED SOLELY FOR RELIGIOUS WORSHIP	
This claim is filed for fiscal year 20 20 (Example: a person filing a timely claim in January 2011 w enter "2011-2012.")	/oul

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 claim must be filed with the	e 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:	rposes necessarily and reasonably required for the s activity, and which is not at other times used for which does not exceed the ordinary and necessary do for 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 ce and infant care centers)? 	nter includes licensed nursery schools, preschools,	
☐ Yes ☐ No		
Note : If the answer is YES to a. or b. above, the property is not eligible for the Church Exempti church and used for religious worship, preschool purposes, nursery school purposes, kindergar grade (grades 1 - 12), or for the purposes of both schools of collegiate grade and schools of less Religious Exemption. The Religious Exemption has a "one-time filing" provision and should	ten purposes, school purposes of less than collegiate than collegiate grade, the claimant may qualify for the	

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claimant may wish instead to annually file by February 15 for the Welfare Exemption.

7. Is the real property listed on t	his claim owned by the church? the name and address of owner:		
OWNER NAME	and data dual cook of owner.		
MAILING ADDRESS (NUMBER AN	D STREET/P. O. BOX)	С	ITY, STATE, ZIP CODE
8. Is leased property, if any, use	d by the church for parking purposes?		
	the congregation of the church, religious deno	mination, or sect	greater than 500 members?
☐ Yes ☐	No If YES, the property, or portion thereof, so	used is not eligi	ble for exemption.
that the church exemption payments, or a refund of suc	is taken into account in fixing the terms	of agreement, t pancy (or use), o	rental agreement does not specifically provide the church shall receive a reduction in rental or portion thereof, during the fiscal year equal to temption.
	ated on this property? If YES, a claim for the Viportion of the property so used, to be exempt.		n must be filed with the Assessor by February 15
10. Is any portion of this propert ☐ Yes ☐ No	y being used for living quarters for any person	? If YES, describ	e that portion:
Exemption. Contact the Asse	ssor.	otions. Certain liv	ring quarters may be exempt under the Welfare
11. Is any portion of this property			
Yes No If YES, de	·		
12. Has any portion of this prope since 12:01 a.m., January 1		or operated by so	ome person or organization other than the claimant
Yes No If YES, des	cribe:		
If property is leased to anothe CHURCH NAME	er church, provide the name and mailing addre	ess:	
MAILING ADDRESS (NUMBER AN	D STREET/P. O. BOX)	С	ITY, STATE, ZIP CODE
Note: Property used by others the user/operator both file a c	s (except for worship only) is not eligible for th laim for the Welfare Exemption. Contact the A	e Church Exempt	tion. It may be exempt if the claimant (owner) and
since 12:01 a.m., January 1		n commenced ar	nd/or completed on this property
Yes No If YES, des	cribe:		
14. Is any equipment or other pr	operty at this location being leased or rented	from someone els	se?
	,		, and serial number of the property. If the property es of the property (attach schedule as necessary).
Whom	should we contact during normal busine	ess hours for a	dditional information?
NAME			TITLE
DAYTIME TELEPHONE	EMAIL ADDRESS		
()			
	CERTIFICAT	ION	
	ty of perjury under the laws of the State of Ca statements or documents, is true, correct, and		pregoing and all information hereon, including any best of my knowledge and belief.
SIGNATURE OF PERSON MAKING CLAIM			TITLE
NAME OF PERSON MAKING CLAIM			DATE
INCIVIL OF FERSON WARRING CLAIM			DATE

