52-AH-R10-0519-14000403-1 OE-262-AH (P1) REV. 10 (05-19) CHURCH EXEMPTION PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP		County of Inyo Dave Stottlemyre, Assessor PO Box J Independence, CA 93526 760 878-0302 Phone inyoassessor@inyocounty.us
This claim is filed for fiscal year 20 20 Example: a person filing a timely claim in January 2011 would nter "2011-2012.")		
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)		
Γ	Г	FOR ASSESSOR'S USE ONLY
		Received
		Approved
		Denied
		Reason for denial
L 		
To receive the full exemption, this clai □ Check here if you no longer seek an exemptior		
IAME OF CHURCH, ORGANIZATION, ETC.	<b>`</b>	5
VEBSITE ADDRESS (IF ANY)		
MAILING ADDRESS (NUMBER AND STREET/P. O. BOX)		
CITY, STATE, ZIP CODE		
DDRESS OF PROPERTY (NUMBER AND STREET)		ASSESSOR'S PARCEL NUMBER
CITY, COUNTY, ZIP CODE		DATE PROPERTY WAS FIRST USED BY CLAIMA
Owner and operator: (check applicable boxes)         Claimant is:       □ Owner and operator       □ Owner only         and claims exemption on all       □ Land       □ Buildings and         Are all buildings and equipment claimed as exempt used sole       □ Yes       □ No         Is the land claimed as exempt required for the convenient use       □ Yes       □ No         Is all real property used by the church upon which exemptic       parking of automobiles of persons attending or engaged in commercial purposes?         □ Yes       □ No <i>Commercial purposes</i> does not include the parking of vehicle costs of operating and maintaining the property for parking pu if the congregation of the church, religious congregation, or set.         List all uses of the property:	improvements and/o ly for religious worship, ir e of these buildings? on is claimed for parking religious worship or relig s or bicycles, the revenue rposes. Leased property ect is no greater than 500	purposes necessarily and reasonably required for jour activity, and which is not at other times used e of which does not exceed the ordinary and necess used for parking purposes is eligible for exemption of
<ul> <li>a. Is an elementary school and/or secondary school being operated at this location of the second s</li></ul>	ion (a children's day care eligible for the Church Exe	emption. If the property is both owned and operated by
church and used for religious worship, preschool purposes, nurse		ergarten purposes, school purposes of less than colleg f less than collegiate grade, the claimant may qualify for

EF-262-AH-R10-0519-14000403-2 BOE-262-AH (P2) REV. 10 (05-19)

7. Is the real property listed on this	claim owned by the church?	□ No If NO, state the name and addre	ss of owner:
OWNER NAME			
MAILING ADDRESS (NUMBER AND S	TREET/P. O. BOX)	CITY, STATE, ZIP CODE	
	congregation of the church, religious	denomination, or sect greater than 500 me of, so used is not eligible for exemption.	embers?
specifically provide that the chur rental payments, or a refund of su	ch exemption is taken into account in ich payments, if paid, for each month	rch; if the lease or rental agreement for a n fixing the terms of agreement, the church of occupancy (or use), or portion thereof, o ason of the Church Exemption. The assess	n shall receive a reduction in during the fiscal year equal to
	on this property? If YES, a claim for tion of the property so used, to be ex	the Welfare Exemption must be filed with empt Yes No	the Assessor by February 15
10. Is any portion of this property be	eing used for living quarters for any p	erson? If YES, describe that portion: $\Box$ Y	es 🗌 No
<b>Note:</b> Living quarters are not e Exemption. Contact the Assesso		exemptions. Certain living quarters may b	e exempt under the Welfare
11. Is any portion of this property va If YES, describe that portion:	acant and/or unused? 🔲 Yes 🗌 No	D	
12. Has any portion of this property l since 12:01 a.m., January 1 las		d and/or operated by some person or organi	zation other than the claimant
a. If property is leased to anothe CHURCH NAME	r church, provide the name and maili	ng address:	
MAILING ADDRESS (NUMBER AND S	TREET/P. O. BOX)	CITY, STATE, ZIP CODE	
<ul> <li>If property is leased to an org sheets if necessary.</li> </ul>	anization other than a church, provide	e the name, type of organization and freque	ency of use; attach additional
NAME		TYPE	FREQUENCY
NAME		TYPE	FREQUENCY
the user/operator both file a clain 13. Has there been any change in	for the Welfare Exemption. Contact	ruction commenced and/or completed on t	
Yes No If YES, list the		nted from someone else? the type, make, model, and serial number of ease state the other uses of the property (as	
Whom sh	ould we contact during normal b	usiness hours for additional informat	ion?
NAME		TITLE	
DAYTIME TELEPHONE	EMAIL ADDRESS		
	CERTIFI	CATION	
I certify (or declare) under penalty of	of perjury under the laws of the State	of California that the foregoing and all infor	mation hereon, including any

accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.

SIGNATURE OF PERSON MAKING CLAIM	TITLE
NAME OF PERSON MAKING CLAIM	DATE

