EF-262-AH-R08-0514-15000826-1 BOE-262-AH (P1) REV. 08 (05-14)

CHURCH EXEM PROPERTY USEI

This claim is filed for fiscal year 20____ - 20_



Laura Avila **Kern County Assessor and Recorder**

Exemptions Division 1115 Truxtun Ave Bakersfield, CA 93301-4639 (661) 868-3485

MPTION	
D SOLELY FOR RELIGIOUS WORSHIP	

(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
	<u>Denied</u>
	Reason for denial
∟ J To receive the full exemption, this claim must be filed	d with the 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:	erking purposes necessarily and reasonably required for the or religious activity, and which is not at other times used for evenue of which does not exceed the ordinary and necessary operty used 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 da and infant care centers)?	y care center 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 church and used for religious worship, preschool purposes, nursery school purposes, grade (grades 1 - 12), or for the purposes of both schools of collegiate grade and school Religious Exemption. The Religious Exemption has a "one-time filing" provision an	kindergarten purposes, school purposes of less than collegiate ols of less 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 this cla	im owned by the church?	
Yes No If NO, state the na		
OWNER NAME		
MAILING ADDRESS (NUMBER AND STR	EET/P. O. BOX)	CITY, STATE, ZIP CODE
8. Is leased property, if any, used by the	ne church for parking purposes?	
☐ Yes ☐ No If YES, is the co	ngregation of the church, religious denomination, or se	ect greater than 500 members?
	YES, the property, or portion thereof, so used is not el	•
that the church exemption is tall payments, or a refund of such pay	ax exemption must inure to the church; if the lease ken into account in fixing the terms of agreement ments, if paid, for each month of occupancy (or use t paid during such fiscal year by reason of the Church	, the church shall receive a reduction in rental, or portion thereof, during the fiscal year equal to
	n this property? If YES, a claim for the Welfare Exemp n of the property so used, to be exempt.	tion must be filed with the Assessor by February 15
10. Is any portion of this property bein ☐ Yes ☐ No	g used for living quarters for any person? If YES, desc	ribe that portion:
Note: Living quarters are not eligi Exemption. Contact the Assessor.	ble for the Church or Religious Exemptions. Certain	living quarters may be exempt under the Welfare
11. Is any portion of this property vaca		
Yes No If YES, describe	that portion:	
12. Has any portion of this property bees since 12:01 a.m., January 1 last years	en rented to, leased to, or been used and/or operated by ear?	some person or organization other than the claimant
☐ Yes ☐ No If YES, describe:		
If property is leased to another chur CHURCH NAME	rch, provide the name and mailing address:	
MAILING ADDRESS (NUMBER AND STR	EET/P. O. BOX)	CITY, STATE, ZIP CODE
	ept for worship only) is not eligible for the Church Exen or the Welfare Exemption. Contact the Assessor.	nption. It may be exempt if the claimant (owner) and
since 12:01 a.m., January 1 last ye	e use of the property or any construction commenced ear?	and/or completed on this property
Yes No If YES, describe:		
☐ Yes ☐ No If YES, list the na	r at this location being leased or rented from someone me and address of the owner and the type, make, mod exclusively for religious worship, please state the other	del, and serial number of the property. If the property
Whom show	ld we contact during normal business hours for	additional information?
NAME VYIIOIII SIIOU	ia we contact during normal business nouts for	TITLE
DAYTIME TELEPHONE ()	EMAIL ADDRESS	
	CERTIFICATION	
	perjury under the laws of the State of California that the pents or documents, is true, correct, and complete to the	
SIGNATURE OF PERSON MAKING CLAIM	,,,,	TITLE
		
NAME OF PERSON MAKING CLAIM		DATE

