	STY OF	Richard Ford	
2-AH-R08-0514-17000755-1 62-AH (P1) REV. 08 (05-14)		County Assessor-Recorder Lake County Courthouse	
CHURCH EXEMPTION	E E	255 North Forbes Street Lakeport, CA 95453	
PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP	OF CALIFO	Assessor's Office Phone: 707-263-2302 Recorder's Office Phone: 707-263-2293	
This claim is filed for fiscal year 20 20 (Example: a person filing a timely claim in January 2011 wou	ld	Fax: 707-263-3703	
enter "2011-2012.")			
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)			
F	Г	FOR ASSESSOR'S USE ONLY	
		Received	
		Approved	
		Denied Reason for denial	
L	1		
To receive the full exemption, this claim	_ must be filed 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	
1. Owner and operator: <i>(check applicable boxes)</i>			
Claimant is: Owner and operator Owner only	Operator only		
and claims exemption on all		Personal property	
2. Are all buildings and equipment claimed as exempt used solely for			
∏ Yes ∏ No			
3. Is the land claimed as exempt required for the convenient use of	these buildings?		
☐ Yes ☐ No			
4. Is all real property used by the church upon which exemption is parking of automobiles of persons attending or engaged in relig commercial purposes?			
Yes No			
Commercial purposes does not include the parking of vehicles or costs of operating and maintaining the property for parking purposit for the congregation of the church, religious congregation, or sect i	ses. Leased property u	sed for parking purposes is eligible for exemption only	
5. List all uses of the property:			
6. a. Is an elementary school and/or secondary school being operat	ed at this location?		
Yes No			
b. Is a children's day care center being operated at this location and infant care centers)?	(a children'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 eligib church and used for religious worship, preschool purposes, nursery s grade (grades 1 - 12), or for the purposes of both schools of collegiate Religious Exemption. The Religious Exemption has a "one-time filir claimant may wish instead to annually file by February 15 for the Welfa	chool purposes, kinderg grade and schools of le ng" provision and shoul	arten purposes, school purposes of less than collegiate ss than collegiate grade, the claimant may qualify for the	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



7. Is the real property listed on this claim owned by the church?

Yes No If NO, state the name and address of owner:

OWNER NAME			
MAILING ADDRESS (NUMBER ANI	D STREET/P. O. BOX)	CITY, STATE, ZIP	CODE
Yes No If YES, is t Yes Yes No Note: The benefit of a propertian that the church exemption payments, or a refund of suc	by the church for parking purposes? he congregation of the church, religious d No If YES, the property, or portion thereovery tax exemption must inure to the ch is taken into account in fixing the ter h payments, if paid, for each month of o	of, so used is not eligible for exempt urch; if the lease or rental agreer ms of agreement, the church sh occupancy (or use), or portion ther	tion. ment does not specifically provide nall receive a reduction in rental
<ul> <li>9. Are bingo games being opera each year for the property, or point of Yes No</li> <li>10. Is any portion of this property Yes No</li> </ul>		he Welfare Exemption must be filed mpt. rson? If YES, describe that portion:	
Yes No If YES, des			
12. Has any portion of this proper since 12:01 a.m., January 1 I		and/or operated by some person or	organization other than the claimant
If property is leased to anothe CHURCH NAME	r church, provide the name and mailing a	Jdress:	
MAILING ADDRESS (NUMBER ANI	D STREET/P. O. BOX)	CITY, STATE, ZIP	CODE
the user/operator both file a cl	-	ne Assessor.	
Yes No If YES, list t	operty at this location being leased or rent he name and address of the owner and th used exclusively for religious worship, plea	e type, make, model, and serial nu	
	should we contact during normal bu		
NAME			TITLE
DAYTIME TELEPHONE	EMAIL ADDRESS	I	
<u>\ /</u>	CERTIFIC	ATION	
I certify (or declare) under penal	ty of perjury under the laws of the State of		Il information hereon, including anv

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

 SIGNATURE OF PERSON MAKING CLAIM

 NAME OF PERSON MAKING CLAIM

 DATE

