EF-262-AH-R10-0519-20000369-1

BOE-262-AH (P1) REV. 10 (05-19)

## **CHURCH EXEMPTION**

## PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP



200 West 4th Street Madera, CA 93637-3548 Phone: (559) 675-7710

**Madera County Assessor** 

**Brett Frazier** 

Fax: (559) 675-7654

www.maderacounty.com/government/assessor

This claim is filed for fiscal year 20 20 Example: a person filing a timely claim in January 2011 wo enter "2011-2012.")	uld
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing addre	ss)

Г	FOR ASSESSOR'S USE ONLY
	Received
	Approved
	Denied
	Reason for denial
L	
To receive the full exemption, this claim must be $\Box$ Check here if you no longer seek an exemption at this local	-
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
<ol> <li>Owner and operator: (check applicable boxes)         Claimant is:</li></ol>	and/or Personal property worship, including any building in the course of construction?  dings?  for parking purposes necessarily and reasonably required for the hip or religious activity, and which is not at other times used for the revenue of which does not exceed the ordinary and necessary and property used for parking purposes is eligible for exemption only
<ul> <li>6. a. Is an elementary school and/or secondary school being operated at this let Yes No</li> <li>b. Is a children's day care center being operated at this location (a children and infant care centers)?</li> <li>Yes No</li> <li>Note: If the answer is YES to a. or b. above, the property is not eligible for the church and used for religious worship, preschool purposes, nursery school purporade (grades 1 - 12), or for the purposes of both schools of collegiate grade and Religious Exemption. The Religious Exemption has a "one-time filing" provision amay wish instead to annually file by February 15 for the Welfare Exemption.</li> </ul>	c's day care center includes licensed nursery schools, preschools, Church Exemption. If the property is both owned and operated by the coses, kindergarten purposes, school purposes of less than collegiate d schools of less than collegiate grade, the claimant may qualify for the

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



7. Is the real property listed or	this claim owned by the church?	☐ No If NO, state the name	and address of owner:	
OWNER NAME				
MAILING ADDRESS (NUMBER A	AND STREET/P. O. BOX)	CITY, STATE	E, ZIP CODE	
Yes No If YES, i	sed by the church for parking purposes? s the congregation of the church, religious de No If YES, the property, or portion thereof,	<del>-</del>		
specifically provide that the rental payments, or a refund	perty tax exemption must inure to the church church exemption is taken into account in fix I of such payments, if paid, for each month of axes not paid during such fiscal year by reaso	king the terms of agreement, occupancy (or use), or portio	, the church shall receive a reduction in in thereof, during the fiscal year equal to	
	erated on this property? If YES, a claim for the property so used, to be exem		e filed with the Assessor by February 15	
10. Is any portion of this prope	erty being used for living quarters for any pers	on? If YES, describe that por	rtion: Yes No	
<b>Note:</b> Living quarters are Exemption. Contact the Ass	not eligible for the Church or Religious Exe sessor.	mptions. Certain living quart	ters may be exempt under the Welfare	
11. Is any portion of this prope If YES, describe that portion	erty vacant and/or unused?			
12. Has any portion of this propsince 12:01 a.m., January	perty been rented to, leased to, or been used an 1 last year?	nd/or operated by some perso	on or organization other than the claimant	
a. If property is leased to a CHURCH NAME	nother church, provide the name and mailing	address:		
MAILING ADDRESS (NUMBER A	AND STREET/P. O. BOX)	CITY, STATE	CITY, STATE, ZIP CODE	
	n organization other than a church, provide th	e name, type of organization	n and frequency of use; attach additional	
sheets if necessary.  NAME		TYPE	FREQUENCY	
NAME			FREQUENCY	
NAIVIE	NAME TYPE		FREQUENCY	
the user/operator both file a  13. Has there been any changes since 12:01 a.m., January  14. Is any equipment or other  Yes No If YES, lis	ers (except for worship only) is not eligible for claim for the Welfare Exemption. Contact the ge in the use of the property or any construct last year? Yes No If YES, described property at this location being leased or rentest the name and address of the owner and the ot used exclusively for religious worship, please	e Assessor.  etion commenced and/or come:  ed from someone else?  e type, make, model, and seri	npleted on this property al number of the property. If the property	
W/s			Linformation 2	
NAME	m should we contact during normal bus	iness nours for additiona	TITLE	
DAYTIME TELEPHONE	EMAIL ADDRESS			
( )	EMAIL ADDRESS			
	CERTIFICA	ATION		
accompanyin	alty of perjury under the laws of the State of ( g statements or documents, is true, correct, a			
SIGNATURE OF PERSON MAKING CLAIM			TITLE	
NAME OF PERSON MAKING CLAIM			DATE	

