EF-262-AH-R10-0519-26000355-1

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

CHURCH EXEMPTION

PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP

This claim is filed for fiscal year 20____ - 20___. (Example: a person filing a timely claim in January 2011 would enter "2011-2012.")



Mono County Office of the Assessor Barry Beck, Assessor

PO Box 456 Bridgeport, CA 93

Bridgeport, CA 93517-0456 Telephone: 760-932-5510 Fax: 760-932-5511

Email: assessor@mono.ca.gov

Website: www.monocounty.ca.gov/assessor

NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing a	address)	
Г	٦	FOR ASSESSOR'S USE ONLY
		Received
		Approved
		Denied
		Reason for denial
L	لـ	
To receive the full exemption, $\hfill\Box$ Check here if you no longer seek an ex		
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
 Owner and operator: (check applicable boxes) Claimant is:	Idings and improvements and/or used solely for religious worship, incl	
		us activity, and which is not at other times used for
☐ Yes ☐ No		
	parking purposes. Leased property us	of which does not exceed the ordinary and necessary need for parking purposes is eligible for exemption only nembers.
5. List all uses of the property:		
6. a. Is an elementary school and/or secondary schoo	l being operated at this location?	
☐ Yes ☐ No		
b. Is a children's day care center being operated at and infant care centers)?	t this location (a children's day care o	enter includes licensed nursery schools, preschools,
☐ Yes ☐ No		
church and used for religious worship, preschool purp grade (grades 1 - 12), or for the purposes of both scho	poses, nursery school purposes, kinderg pols of collegiate grade and schools of le 'one-time filing" provision and should be	ption. If the property is both owned and operated by the arten purposes, school purposes of less than collegiate ss than collegiate grade, the claimant may qualify for the filed by February 15; contact the Assessor. The claimant

OWNER NAME		No If NO, state the name and address o		
OWNER NAME				
MAILING ADDRESS (NUMBER	AND STREET/P. O. BOX)	CITY, STATE, ZIP CODE		
☐ Yes ☐ No If YES,	used by the church for parking purposes? , is the congregation of the church, religious de No If YES, the property, or portion thereof	-	ers?	
specifically provide that the rental payments, or a refun	operty tax exemption must inure to the church e church exemption is taken into account in find of such payments, if paid, for each month of taxes not paid during such fiscal year by reaso	xing the terms of agreement, the church sha occupancy (or use), or portion thereof, durin	all receive a reduction ing the fiscal year equal t	
	perated on this property? If YES, a claim for th or portion of the property so used, to be exem		Assessor by February 1	
0. Is any portion of this prop	perty being used for living quarters for any pers	son? If YES, describe that portion:	☐ No	
Note: Living quarters are Exemption. Contact the As	e not eligible for the Church or Religious Exessessor.	emptions. Certain living quarters may be ex	kempt under the Welfar	
 Is any portion of this prop If YES, describe that porti 	perty vacant and/or unused?			
	operty been rented to, leased to, or been used a y 1 last year?	nd/or operated by some person or organization	on other than the claimar	
a. If property is leased to CHURCH NAME	another church, provide the name and mailing	address:		
MAILING ADDRESS (NUMBER	AND STREET/P. O. BOX)	CITY, STATE, ZIP CODE	CITY, STATE, ZIP CODE	
h If property is lessed to	an organization other than a church, provide the	he name type of organization and frequency	, of use: attach addition	
sheets if necessary.	an organization other than a church, provide the	ne name, type of organization and frequency	y or use, attach additions	
NAME		TYPE	FREQUENCY	
NAME		TYPE	FREQUENCY	
the user/operator both file 3. Has there been any char since 12:01 a.m., January 4. Is any equipment or othe Yes \(\sumset \text{No} \) If YES, I	hers (except for worship only) is not eligible for a claim for the Welfare Exemption. Contact the nge in the use of the property or any construct y 1 last year? Yes No If YES, describer property at this location being leased or rentelist the name and address of the owner and the not used exclusively for religious worship, plea	e Assessor. ction commenced and/or completed on this he: ed from someone else? he type, make, model, and serial number of th	property e property. If the proper	
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	om should we contact during normal bus	tiness hours for additional information	ſ	
AME				
	EMAIL ADDRESS	·		
	EMAIL ADDRESS CERTIFICA	ATION		
AYTIME TELEPHONE) certify (or declare) under pe		California that the foregoing and all informat		
AYTIME TELEPHONE) certify (or declare) under pe	CERTIFICA enalty of perjury under the laws of the State of ng statements or documents, is true, correct, a	California that the foregoing and all informat		

