CHURCH EXEMPTION PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP



Gus Kramer County Assessor 2530 Arnold Drive, Suite 100 Martinez, CA 94553-4359 FAX: (925) 313-7488 Telephone: (925) 313-7400 http://www.cccounty.us/assessor

This claim is filed for fiscal year 20 20 (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
	Denied
	Reason for denial
L	
To receive the full exemption, this claim must be filed w	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: (check applicable boxes)	
Claimant is: Owner and operator Owner only Operator only	
and claims exemption on all Land Buildings and improvements ar	nd/or Personal property
2. Are all buildings and equipment claimed as exempt used solely for religious worshi	p, including any building in the course of construction?
🗌 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 claimed for park parking of automobiles of persons attending or engaged in religious worship or commercial purposes?	
Yes No	
Commercial purposes does not include the parking of vehicles or bicycles, the reve	enue of which does not exceed the ordinary and necessary
costs of operating and maintaining the property for parking purposes. Leased proper if the congregation of the church, religious congregation, or sect is no greater than	erty used 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 operated at this location?

🗌 Yes 🗌 No

b. Is a children's day care center being operated at this location (a children's day care center includes licensed nursery schools, preschools, and infant care centers)?

Note: If the answer is YES to a. or b. above, the property is not eligible for the Church Exemption. If the property is both owned and operated by the church and used for religious worship, preschool purposes, nursery school purposes, kindergarten purposes, school purposes of less than collegiate grade (grades 1 - 12), or for the purposes of both schools of collegiate grade and schools of less than collegiate grade, the claimant may qualify for the Religious Exemption. The Religious Exemption has a "one-time filing" provision and should be filed by February 15; contact the Assessor. The claimant may wish instead to annually file by February 15 for the Welfare Exemption.

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



[🗌] Yes 🗌 No

- 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 AND STREI	ET/P. O. BOX)	CITY, STATE, ZIF	CODE
■ Yes ■ No If N Note: The benefit of a property tax	gregation of the church, religious de YES, the property, or portion thereof x exemption must inure to the chu	, so used is not eligible for exemp rch; if the lease or rental agree	tion. ment does not specifically provide
that the church exemption is take payments, or a refund of such payn one-twelfth of the property taxes not	nents, if paid, for each month of oc	ccupancy (or use), or portion the	
 9. Are bingo games being operated on each year for the property, or portion Yes □ No 			d with the Assessor by February 15
10. Is any portion of this property being Yes No	used for living quarters for any pers	on? If YES, describe that portion	
Note: Living quarters are not eligib Exemption. Contact the Assessor.		mptions. Certain living quarters	may be exempt under the Welfare
11. Is any portion of this property vacan ☐ Yes ☐ No If YES, describe the second sec			
12. Has any portion of this property beer since 12:01 a.m., January 1 last yea		nd/or operated by some person or	organization other than the claimant
Yes No If YES, describe:	HNI	PLI	
If property is leased to another churc CHURCH NAME	h, provide the name and mailing ad	dress:	
MAILING ADDRESS (NUMBER AND STREE		CITY, STATE, ZIF	
Note: Property used by others (exce the user/operator both file a claim for	the Welfare Exemption. Contact the	e Assessor.	
13. Has there been any change in the since 12:01 a.m., January 1 last yea		tion commenced and/or complet	ed on this property
Yes No If YES, describe:			
	at this location being leased or rente ne and address of the owner and the xclusively for religious worship, pleas	e type, make, model, and serial n	
Whom should	d we contact during normal bus	iness hours for additional inf	ormation?
NAME			TITLE
DAYTIME TELEPHONE	EMAIL ADDRESS		1
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CERTIFICATION

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information 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
NAME OF PERSON MAKING CLAIM	DATE

