EF-262-AH-R10-0519-09000193-1

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

CHURCH EXEMPTION

This claim is filed for fiscal year 20_

PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP



360 FAIR LN. PLACERVILLE, CA 95667

EL DORADO COUNTY

JON DEVILLE, ASSESSOR

TEL. 530-621-5719

(Example: a person filing a timely claim in Janu enter "2011-2012.")	ary 2011 would	
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name a	nd mailing address)	
		FOR ASSESSOR'S USE ONLY
		Received
		Approved
		Denied
		Reason for denial
L		
To receive the full exem	option, this claim must be filed with the	Assessor by February 15.
☐ Check here if you no longer seel	k an exemption at this location. Sign ar	nd return this form to the Assessor.
NAME OF CHURCH, ORGANIZATION, ETC.		A
WEBSITE ADDRESS (IF ANY)		
MAILING ADDRESS (NUMBER AND STREET/P. O. BO	OX)	
CITY, STATE, ZIP CODE		
ADDRESS OF PROPERTY (NUMBER AND STREET)	4 <i>/////</i>	ASSESSOR'S PARCEL NUMBER
CITY, COUNTY, ZIP CODE		DATE PROPERTY WAS FIRST USED BY CLAIMANT
and claims exemption on all ☐ Land 2. Are all buildings and equipment claimed as ☐ Yes ☐ No	exempt used solely for religious worship, including	☐ Personal property ng any building in the course of construction?
3. Is the land claimed as exempt required for	the convenient use of these buildings?	
Yes No		
		oses <mark>ne</mark> cessarily and reasonably required for the activ <mark>ity</mark> , and which is not at other times used for
☐ Yes ☐ No		
costs of operating and maintaining the prop		hich does not exceed the ordinary and necessary for parking purposes is eligible for exemption only
5. List all uses of the property:	- greater than 500 mem	
o. Electual decept of the property.		
6. a. Is an elementary school and/or secondar	ry school being operated at this location?	
☐ Yes ☐ No		
b. Is a children's day care center being operand infant care centers)?	erated at this location (a children's day care cent	er includes licensed nursery schools, preschools,
☐ Yes ☐ No		
church and used for religious worship, presch grade (grades 1 - 12), or for the purposes of b	nool purposes, nursery school purposes, kindergarte oth schools of collegiate grade and schools of less the	n. If the property is both owned and operated by the en purposes, school purposes of less than collegiate han collegiate grade, the claimant may qualify for the d by February 15; contact the Assessor. The claimant

may wish instead to annually file by February 15 for the Welfare Exemption.

7. Is the real property listed on	this claim owned by the church? $\ \ \square$ Yes	☐ No If NO, state the name and address of owner:
OWNER NAME		
MAILING ADDRESS (NUMBER A	ND STREET/P. O. BOX)	CITY, STATE, ZIP CODE
Yes No If YES, is Yes Yes Yes Yes Yes Yes Yes Yes Yes Specifically provide that the crental payments, or a refund one-twelfth of the property ta lease or rental agreement. 9. Are bingo games being open each year for the property, or 10. Is any portion of this property.	No If YES, the property, or portion there erty tax exemption must inure to the church exemption is taken into account ir of such payments, if paid, for each month xes not paid during such fiscal year by rearted on this property? If YES, a claim for a portion of the property so used, to be extra to be used to be desired used for living quarters for any poor eligible for the Church or Religious E	rch; if the lease or rental agreement for any leased property does not fixing the terms of agreement, the church shall receive a reduction in of occupancy (or use), or portion thereof, during the fiscal year equal to ason of the Church Exemption. The assessor may request a copy of the the Welfare Exemption must be filed with the Assessor by February 15
11. Is any portion of this pr <mark>op</mark> er If YES, describe that portion	ty vac <mark>an</mark> t and/or <mark>un</mark> used <mark>? Yes No</mark> n:	
since 12:01 a.m., January 1	last year? Yes No nother church, provide the name and mail	d and/or operated by some person or organization other than the claimant ng address: CITY, STATE, ZIP CODE
b. If property is leased to ar sheets if necessary. NAME	n organization other than a church, provide	the name, type of organization and frequency of use; attach additional TYPE FREQUENCY TYPE FREQUENCY
the user/operator both file a 13. Has there been any chang since 12:01 a.m., January 1 14. Is any equipment or other part of Yes No If YES, list	claim for the Welfare Exemption. Contact e in the use of the property or any constitution of the property of any constitution of the property of the property of the property at this location being leased or retain the name and address of the owner and	ructi <mark>on</mark> com <mark>menced and/or co</mark> mpleted on this property ribe:
	n should we contact during normal b	usiness hours for additional information?
NAME		TITLE
DAYTIME TELEPHONE ()	EMAIL ADDRESS	•
()	CERTIFI	CATION
	alty of perjury under the laws of the State	of California that the foregoing and all information hereon, including any , and complete to the best of my knowledge and belief.
SIGNATURE OF PERSON MAKING CLAIM		TITLE
NAME OF PERSON MAKING CLAIM		DATE

