EF-262-AH-R10-0519-18000237-1

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

## **CHURCH EXEMPTION**

This claim is filed for fiscal year 20\_

## PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP



220 S Lassen Street Susanville, CA 96130-4324

**Nick Ceaglio** 

Phone: (530) 251-8241

http://www.lassencounty.org/dept/assessor/assesso

**Lassen County Assessor** 

(Example: a person filing a timely claim in January 2011 would enter "2011-2012.")	1	
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)		
Г	٦	FOR ASSESSOR'S USE ONLY
		Received
		Approved
		Denied
		Reason for denial
L	7	
To receive the full exemption, this  ☐ Check here if you no longer seek an exemp		
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)	WHI	ASSESSOR'S PARCEL NUMBER
CITY, COUNTY, ZIP CODE	V	DATE PROPERTY WAS FIRST USED BY CLAIMANT
	solely for religious worship, including at use of these buildings?  In the solution of these buildings?  In the solution of th	es necessarily and reasonably required for the stivity, and which is not at other times used for the ch does not exceed the ordinary and necessary reparking purposes is eligible for exemption only
6. a. Is an elementary school and/or secondary school being  Yes No  b. Is a children's day care center being operated at this I and infant care centers)?  Yes No  Note: If the answer is YES to a. or b. above, the property is church and used for religious worship, preschool purposes, grade (grades 1 - 12), or for the purposes of both schools of Religious Exemption. The Religious Exemption has a "one-time may wish instead to annually file by February 15 for the Welf	location (a children's day care center not eligible for the Church Exemption nursery school purposes, kindergarten collegiate grade and schools of less tha me filing" provision and should be filed by	If the property is both owned and operated by the purposes, school purposes of less than collegiate in collegiate grade, the claimant may qualify for the



7. Is the real property listed on	this claim owned by the church? $\ \ \Box$ 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 being 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

