EF-262-AH-R10-0519-21000198-1

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

CHURCH EXEMPTION

PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP

This claim is filed for fiscal year 20_ (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)
Г



Shelly Scott Assessor-Recorder-County Clerk

County of Marin P.O. Box C San Rafael, CA 94913 Phone: (415) 473-7215

Fax: (415) 473-6542

(Make necessary corrections to the printed name	and mailing address)	
Г	٦	FOR ASSESSOR'S USE ONLY
		Received
		Approved
		Denied
		Reason for denial
L	_	
	mption, this claim must be filed with the As ek an exemption at this location. Sign and	
NAME OF CHURCH, ORGANIZA <mark>TIO</mark> N, ETC.	$\overline{}$	
WEBSITE ADDRESS (IF ANY)	110 1 6	
MAILING ADDRESS (NUMBER AND STREET/P. O. I	BOX)	
CITY, STATE, ZIP CODE	/ / / / / / / / / / / / / / / / / / / 	
ADDRESS OF PROPERTY (NUMBER AND STREET		ASSESSOR'S PARCEL NUMBER
CITY, COUNTY, ZIP CODE	* / V / / -	DATÉ PROPERTY WAS FIRST USED BY CLAIMANT
☐ Yes ☐ No 3. Is the land claimed as exempt required fo ☐ Yes ☐ No 4. Is all real property used by the church u parking of automobiles of persons attend commercial purposes? ☐ Yes ☐ No Commercial purposes does not include the costs of operating and maintaining the pro-	Owner only	s necessarily and reasonably required for the ivity, and which is not at other times used for h does not exceed the ordinary and necessary parking purposes is eligible for exemption only
6. a. Is an elementary school and/or second ☐ Yes ☐ No	ary school being operated at this location?	
b. Is a children's day care center being of and infant care centers)?	perated at this location (a children's day care center i	ncludes licensed nursery schools, preschools,
☐ Yes ☐ No		
church and used for religious worship, presegrade (grades 1 - 12), or for the purposes of	e, the property is not eligible for the Church Exemption. It chool purposes, nursery school purposes, kindergarten p f both schools of collegiate grade and schools of less than tion has a "one-time filing" provision and should be filed by try 15 for the Welfare Exemption.	purposes, school purposes of less than collegiate a collegiate grade, the claimant may qualify for the

7. Is the real property listed on	this claim owned by the church?	□ 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 extry being used for living quarters for any pot eligible for the Church or Religious E	rch; if the lease or rental agreement for any leased property do no fixing the terms of agreement, the church shall receive a reduce of occupancy (or use), or portion thereof, during the fiscal year eason of the Church Exemption. The assessor may request a coperate the Welfare Exemption must be filed with the Assessor by February	uction in equal to by of the ruary 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> use <mark>d? Yes No</mark> n:		
since 12:01 a.m., January 1	last year?	d and/or operated by some person or organization other than the organization of the or	claimant
b. If property is leased to ar sheets if necessary. NAME	n organization other than a church, provide		dditional QUENCY QUENCY
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 const last year? Yes No If YES, desconoperty at this location being leased or ret the name and address of the owner and	ruction commenced and/or completed on this property ribe:	property
	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, include t, and complete to the best of my knowledge and belief.	ding any
SIGNATURE OF PERSON MAKING CLAIM		TITLE	
NAME OF PERSON MAKING CLAIM		DATE	

