EF-262-AH-R09-0515-41000413-1 BOE-262-AH (P1) REV. 09 (05-15)

CHURCH EXEMPTION

enter "2011-2012.")



This claim is filed for fiscal year 20____ - 20_

(Example: a person filing a timely claim in January 2011 would



MARK CHURCH Assessor - County Clerk - Recorder er, First Floor

A 94063-1665 3-4500 435

2smcacre.gov cre.gov

ONTO 18th	555 County Cent Redwood City, C. Phone: (650) 363 Fax: (650) 599-74 email: assessor@ web: www.smcac

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 fil	ed with the Assessor by February 15.
☐ Check here if you no longer seek an exemption at this locat	ion. <mark>Sign and return</mark> this form to the Assessor.
NAME OF CHURCH, ORGANIZA <mark>TIO</mark> N, ETC.	1.) A
WEBSITE ADDRESS (IF ANY)	
MAILING ADDRESS (NUMBER AND STREET/P. O. BOX)	
CITY, STATE, ZIP CODE	
ADDRESS OF PROPERTY (NUMBER AND STREET)	ACCESCADA PARCE MUNICIPAL
ADDRESS OF PROPERTY (NUMBER AND STREET)	ASSESSOR'S PARCEL NUMBER
CITY, COUNTY, ZIP CODE	DATE PROPERTY WAS FIRST USED BY CLAIMANT
1. Owner and energter: (aheak applicable haves)	
 Owner and operator: (check applicable boxes) Claimant is: ☐ Owner and operator ☐ Owner only ☐ Operator only 	
and claims exemption on all	and/or ☐ Personal property
2. Are all buildings and equipment claimed as exempt used solely for religious w	
☐ Yes ☐ No	y, and any of an
3. Is the land claimed as exempt required for the convenient use of these building	gs?
4. Is all real property used by the church upon which exemption is claimed for	
parking of automobiles of persons attending or engaged in religious worship commercial purposes?	
☐ Yes ☐ No	
Commercial purposes does not include the parking of vehicles or bicycles, the costs of operating and maintaining the property for parking purposes. Leased if the congregation of the church religious congregation or cost	property used for parking purposes is eligible for exemption only
if the congregation of the church, religious congregation, or sect is no greater 5. List all uses of the property:	ilian 300 incilibeis.
s. List all uses of the property.	
6. a. Is an elementary school and/or secondary school being operated at this loc	ation?
☐ Yes ☐ No	
b. Is a children's day care center being operated at this location (a children's and infant care centers)?	day care center includes licensed nursery schools, preschools
☐ Yes ☐ No	
Note : If the answer is YES to a. or b. above, the property is not eligible for the Chuchurch and used for religious worship, preschool purposes, nursery school purpose grade (grades 1 - 12), or for the purposes of both schools of collegiate grade and so	es, kindergarten purposes, school purposes of less than collegiate

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

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.

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7. Is the real property listed on this claim owned by the church? $\ $ Yes $\ $ No $\ $ I	If NO, state the name and address of owner:
OWNER NAME	
MAILING ADDRESS (NUMBER AND STREET/P. O. BOX)	CITY, STATE, ZIP CODE
B. Is leased property, if any, used by the church for parking purposes? Yes No If YES, is the congregation of the church, religious denomination Yes No If YES, the property, or portion thereof, so use Note: The benefit of a property tax exemption must inure to the church; if that the church exemption is taken into account in fixing the terms of a payments, or a refund of such payments, if paid, for each month of occupant one-twelfth of the property taxes not paid during such fiscal year by reason of the Are bingo games being operated on this property? If YES, a claim for the Welfa each year for the property, or portion of the property so used, to be exempt. Note: Living quarters are not eligible for the Church or Religious Exemptions Exemption. Contact the Assessor. Note: Living quarters are not eligible for the Church or Religious Exemptions Exemption. Contact the Assessor. In Is any portion of this property vacant and/or unused? Yes No If YES, describe that portion: Note: Living quarters are not eligible for the Church or Religious Exemptions Exemption of this property vacant and/or unused? Yes No If YES, describe that portion: In It any portion of this property been rented to, leased to, or been used and/or or since 12:01 a.m., January 1 last year? Yes No In It property is leased to another church, provide the name and mailing addrection.	ed is not eligible for exemption. The lease or rental agreement does not specifically provide agreement, the church shall receive a reduction in rental cy (or use), or portion thereof, during the fiscal year equal to the Church Exemption. The Exemption must be filed with the Assessor by February 15 Yes No YES, describe that portion: Yes No S. Certain living quarters may be exempt under the Welfare operated by some person or organization other than the claimant
b. If property is leased to an organization other than a church, provide the name sheets if necessary.	ne, type of organization and frequency of use; attach additional
NAME	TYPE FREQUENCY
Note: Property used by others (except for worship only) is not eligible for the Ch the user/operator both file a claim for the Welfare Exemption. Contact the Asses	
 13. Has there been any change in the use of the property or any construction co since 12:01 a.m., January 1 last year? Yes No If YES, describe: 14. Is any equipment or other property at this location being leased or rented from Yes No If YES, list the name and address of the owner and the type, 	someone else?
Whom should we contact during normal business	hours for additional information?
DAYTIME TELEPHONE EMAIL ADDRESS	
() CERTIFICATION	1
CERTIFICATION I certify (or declare) under penalty of perjury under the laws of the State of Califorr accompanying statements or documents, is true, correct, and con	nia that the foregoing and all information hereon, including any
SIGNATURE OF PERSON MAKING CLAIM	TITLE
NAME OF PERSON MAKING CLAIM	DATE

