EF-262-AH-R10-0519-22000158-1

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

CHURCH EXEMPTION

PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP

This claim is (Example: a enter "2011-2

Vincent P. Kehoe County of Mariposa Assessor/Recorder

4982 10th St P.O. Box 35 Mariposa, CA 95338 66-2332 966-5719

	OSA COS	Ph: (209) 96
s filed for fiscal year 20 20		Fax: (209) 9
person filing a timely claim in January 2011 would		
2012.")		

NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mai	iling address)	
Г	٦	FOR ASSESSOR'S USE ONLY
		Received
		Approved
		Denied
		Reason for denial
1	1	
	on, this claim must be filed with the Ass exemption at this location. Sign and re	
WEBSITE ADDRESS (IF ANY)		
MAILING ADDRESS (NUMBER AND STREET/P. O. BOX)		
CITY, STATE, ZIP CODE		
ADDRESS OF PROPERTY (NUMBER AND STREET)	A	SSESS <mark>OR'S PARCEL NUMB</mark> ER
CITY, COUNTY, ZIP CODE	D	NATE PROPERTY WAS FIRST USED BY CLAIMANT
Owner and operator: (check applicable boxes)		
Claimant is:	Owner only	
and claims exemption on all	Buildings a <mark>nd</mark> improve <mark>me</mark> nts a <mark>nd</mark> /or ☐ Pe	erso <mark>na</mark> l proper <mark>ty</mark>
2. Are all buildings and equipment claimed as exer		
☐ Yes ☐ No		
3. Is the land claimed as exempt required for the co	onvenient use of these buildings?	_
☐ Yes ☐ No		_
4. Is all real property used by the church upon w	hich exemption is claimed for parking purposes rengaged in religious worship or religious activity	
☐ Yes ☐ No		1
costs of operating and maintaining the property	ring of vehicles or bicycles, the revenue of which of for parking purposes. Leased property used for pa regation, or sect is no greater than 500 members.	arking purposes is eligible for exemption only
5. List all uses of the property:		
6. a. Is an elementary school and/or secondary sch	hool being operated at this location?	
☐ Yes ☐ No		
b. Is a children's day care center being operated and infant care centers)?	d at this location (a children's day care center inc	cludes licensed nursery schools, preschools,
☐ Yes ☐ No		
church and used for religious worship, preschool p grade (grades 1 - 12), or for the purposes of both so	property is not eligible for the Church Exemption. If the purposes, nursery school purposes, kindergarten pur chools of collegiate grade and schools of less than constant as a "one-time filing" provision and should be filed by For the Welfare Exemption.	rposes, school purposes of less than collegiate collegiate grade, the claimant may qualify for the



7. Is the real property listed on this	claim owned by the church? 🔲 Yes	No If NO, state the nam	e and address of owner:
OWNER NAME			
MAILING ADDRESS (NUMBER AND S	TREET/P. O. BOX)	CITY, STA	TE, ZIP CODE
	the church for parking purposes? congregation of the church, religious If YES, the property, or portion there		
specifically provide that the church rental payments, or a refund of su	ch exemption is taken into account in ich payments, if paid, for each month	n fixing the terms of agreemer of occupancy (or use), or port	eement for any leased property does not at, the church shall receive a reduction in ion thereof, during the fiscal year equal to . The assessor may request a copy of the
	on this property? If YES, a claim for tion of the property so used, to be ex		be filed with the Assessor by February 15
10. Is any portion of this property be	eing <mark>us</mark> ed for liv <mark>ing</mark> qu <mark>art</mark> ers f <mark>or</mark> any p	erson? If YES, describe that p	ortion: Yes No
Exemption. Contact the Assesso			arters may be exempt under the Welfare
If YES, describe that portion:			
12. Has any portion of this property be since 12:01 a.m., January 1 last	peen rented to, leased to, or been used year? Yes No	d and/or operated by some per-	son or organization other than the claimant
a. If property is leased to anothe CHURCH NAME	er church, provide the name and maili	ng address:	
MAILING ADDDESS ALL ADDD AND S		Town or a	
MAILING ADDRESS (NUMBER AND S	TREE TIP. O. BOX)	CITY, STA	TE, ZIP CODE
b. If property is leased to an org sheets if necessary.	anization other than a church, provid	e the name, type of organization	on and frequency of use; attach additional
NAME		TYPE	FREQUENCY
NAME		TYPE	FREQUENCY
the user/operator both file a claim 13. Has there been any change in since 12:01 a.m., January 1 last	n for the Welfare Exemption. Contact the use of the property or any const year? Yes No If YES, desc	the Assessor. ruction commenced and/or co ribe:	nay be exempt if the claimant (owner) and make make make make make make make make
☐ Yes ☐ No If YES, list the		the type, make, model, and se	erial number of the property. If the property e property (attach schedule as necessary):
Whom she	ould we contact during normal b	usiness hours for addition	al information?
			THEE
DAYTIME TELEPHONE ()	EMAIL ADDRESS		
,	CERTIFI	CATION	
	of perjury under the laws of the State ements or documents, is true, correc		and all information hereon, including any my knowledge and belief.
SIGNATURE OF PERSON MAKING CLAIM			TITLE
NAME OF PERSON MAKING CLAIM			DATE

