EF-262-AH-R10-0519-31000187-1

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

CHURCH EXEMPTION

PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP



2980 Richardson Dr Auburn CA 95603 Fax: 530-889-4305

Phone: 530-889-4300 assessor@placer.ca.gov

Matthew R. Maynard

Placer County Assessor

This claim is filed for fiscal year 20 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	٦	FOR ASSESSOR'S USE ONLY
		Received
		Approved
		Denied
		Reason for denial
L	ل	
	otion, this claim must be filed with the As	
NAME OF CHURCH, ORGANIZATION, ETC.	an exemption at this location. Sign and r	etum this form to the Assessor.
WEBSITE ADDRESS (IF ANY)		
MAILING ADDRESS (NUMBER AND STREET/P. O. BO)	X)	
CITY, STATE, ZIP CODE		
ADDRESS OF PROPERTY (NUMBER AND STREET)	4////	ASSESS <mark>OR</mark> 'S PARCEL NUM <mark>B</mark> ER
CITY, COUNTY, ZIP CODE	**************************************	DATE PROPERTY WAS FIRST USED BY CLAIMANT
2. Are all buildings and equipment claimed as each of the Yes No 3. Is the land claimed as exempt required for the Yes No 4. Is all real property used by the church upon parking of automobiles of persons attending commercial purposes? Yes No Commercial purposes does not include the process of operating and maintaining the propertif the congregation of the church, religious controls.	exempt used solely for religious worship, including a	s necessarily and reasonably required for the vity, and which is not at other times used for a does not exceed the ordinary and necessary parking purposes is eligible for exemption only
5. List all uses of the property:		
6. a. Is an elementary school and/or secondary	school being operated at this location?	
☐ Yes ☐ No		
and infant care centers)?	rated at this location (a children's day care center in	ncludes licensed nursery schools, preschools,
☐ Yes ☐ No		
church and used for religious worship, prescho grade (grades 1 - 12), or for the purposes of bo	he property is not eligible for the Church Exemption. If bol purposes, nursery school purposes, kindergarten pu oth schools of collegiate grade and schools of less than has a "one-time filing" provision and should be filed by	urposes, school purposes of less than collegiate collegiate grade, the claimant may qualify for the

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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? $\ \ \Box$ Y	es 🗌 No If NO, state the nam	e and address of owner:			
OWNER NAME						
MAILING ADDRESS (NUMBER AN	ND STREET/P. O. BOX)	CITY, STAT	E, ZIP CODE			
8. Is leased property, if any, use	ed by the church for parking purposes?	l I				
Yes No If YES, is						
specifically provide that the crental payments, or a refund of	hurch exemption is taken into account of such payments, if paid, for each mon	in fixing the terms of agreemen th of occupancy (or use), or porti	ement for any leased property does not t, the church shall receive a reduction in on thereof, during the fiscal year equal to The assessor may request a copy of the			
	ated on this property? If YES, a claim for portion of the property so used, to be experted in the second se		pe filed with the Assessor by February 15			
10. Is any portion of this proper	ty being <mark>us</mark> ed for liv <mark>ing</mark> qu <mark>art</mark> ers for any	person? If YES, describe that po	ortion: Yes No			
Exemption. Contact the Asse			rters may be exempt under the Welfare			
If YES, describe that portion						
12. Has any portion of this prope since 12:01 a.m., Janu <mark>ary 1</mark>	rty been rented to, leased to, or been us last year?	ed and/or operated by some pers	on or organization other than the claimant			
a. If property is leased to an CHURCH NAME	other church, provide the name and ma	uling address:				
MAILING ADDRESS (NUMBER AN	ND STREET/P. O. BOX)	CITY, STAT	E, ZIP CODE			
b. If property is leased to an sheets if necessary.	organization other than a church, prov	ide the name, type of organization	on and frequency of use; attach additional			
NAME		TYPE	FREQUENCY			
NAME		TYPE	FREQUENCY			
the user/operator both file a c 13. Has there been any change since 12:01 a.m., January 1	claim for the Welfare Exemption. Conta e in the use of the property or any con last year? Yes No If YES, de	ct the Assessor. struction commenced and/or co scribe:	ay be exempt if the claimant (owner) and mpleted on this property			
☐ Yes ☐ No If YES, list		d the type, make, model, and se	rial number of the property. If the property property (attach schedule as necessary):			
Whom	should we contact during normal	business hours for addition	al information?			
NAME			TITLE			
DAYTIME TELEPHONE	EMAIL ADDRESS					
()						
	CERTI	FICATION				
accompanying	lty of perjury under the laws of the Stat statements or documents, is true, corre		and all information hereon, including any ny knowledge and belief.			
SIGNATURE OF PERSON MAKING CLAIM			TITLE			
NAME OF PERSON MAKING CLAIM			DATE			

