EF-262-AH-R10-0519-36000186-1

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

## **Josie Gonzales Assessor-Recorder-County Clerk**

County of San Bernardino Assessor's Office 222 W. Hospitality Lane - 4th Floor San Bernardino, CA 92415-0311 www.sbcounty.gov/arc

Phone: (909) 387-8307 Toll Free: (877) 885-7654

(Make necessary corrections to the print	led name and mailing address)	
Г	コ	FOR ASSESSOR'S USE ONLY
		Received
		Approved
		Denied
		Reason for denial
L	ل	
☐ Check here if you no longename of church, organization, etc.	I exemption, this claim must be filed with er seek an exemption at this location. Sig	
WEBSITE ADDRESS (IF ANY)		
MAILING ADDRESS (NUMBER AND STREE	T/P. O. BOX)	
CITY, STATE, ZIP CODE		
ADDRESS OF PROPERTY (NUMBER AND S	STREET)	ASSESSOR'S PARCEL NUMBER
CITY, COUNTY, ZIP CODE		DATE PROPERTY WAS FIRST USED BY CLAIMANT
· · · · · · · · · · · · · · · · · · ·	perator	
3. Is the land claimed as exempt requi	ired for the convenient use of these buildings?	
☐ Yes ☐ No		
		purposes necessarily and reasonably required for the ous activity, and which is not at other times used for
☐ Yes ☐ No	OCL	<b>-</b>
costs of operating and maintaining t		of which does not exceed the ordinary and necessary used for parking purposes is eligible for exemption only members.
5. List all uses of the property:		
6. a. Is an elementary school and/or s	econdary school being operated at this location?	
Yes No	, , , , , , , , , , , , , , , , , , , ,	
	eing operated at this location (a children's day care	center includes licensed nursery schools, preschools,
☐ Yes ☐ No		
Note: If the answer is YES to a. or b. church and used for religious worship grade (grades 1 - 12), or for the purpo Religious Exemption. The Religious E	o, preschool purposes, nursery school purposes, kinder oses of both schools of collegiate grade and schools of l	mption. If the property is both owned and operated by the rgarten purposes, school purposes of less than collegiate ess than collegiate grade, the claimant may qualify for the e filed by February 15; contact the Assessor. The claimant

All LING ADDRESS (NUMBER AND STREETP O. BOX)  It is leased property, if any, used by the church for parking purposes?    Yes   No   If YES, is the congregation of the church, religious denomination, or sect greater than 500 members?   Yes   No   If YES, is the congregation of the church, religious denomination, or sect greater than 500 members?   Yes   No   If YES, is the congregation of the church, religious denomination, or sect greater than 500 members?   Yes   No   If YES, is the congregation of the church, religious denomination, or sect greater than 500 members?   Note: The benefit of a property tax exemption must be flied with the church statul receive a reduction of the property taxes not paid during such fiscal year exposent of the Church Exemption. The assessor may request a copy of lease or rental agreement, the church statul receive a reduction of the property taxes not paid during such fiscal year exposence whether the property taxes not paid during such fiscal year exposence on the Church Exemption. The assessor may request a copy of lease or rental agreement.		on this claim owned by the church? Yes	No If NO, state the name and addre	ess of owner:
Is leased property, if any, used by the church for parking purposes?    Yes   No	OWNER NAME			
Yes   No	MAILING ADDRESS (NUMBER	AND STREET/P. O. BOX)	CITY, STATE, ZIP CODE	
specifically provide that the church exemption is taken into account in fixing the terms of agreement, the church shall receive a reductive rental payments, or a refund of such payments, if paid, for each month of occupancy (or use), or portion thereof, during the fiscal year equent-weight of the property taxes not paid during such fiscal year by reason of the Church Exemption. The assessor may request a copy of lease or rental agreement.  Are bings games being operated on this property? If YES, a claim for the Welfare Exemption must be filed with the Assessor by Februal each year for the property, or portion of the property so used, to be exempt.   yes   No    1. Is any portion of this property being used for living quarters for any person? If YES, describe that portion:   yes   No    1. Is any portion of this property being used for living quarters for any person? If YES, describe that portion:   yes   No    1. Is any portion of this property vacant and/or unused?   Yes   No    1. If YES, describe that portion:  2. Has any portion of this property vacant and/or unused?   Yes   No    3. If property is leased to an organization other than a church, provide the name, type of organization and frequency of use; attach additionable and the state of the property used by others (except for worship only) is not eligible for the Church Exemption. It may be exempt if the claimant (owner the user/operator both file a claim for the Welfara Exemption, Contact the Assessor.  1. Has there been any change in the use of the property of the property of the property (aftech schedule as necessary.  1. Has here been any change in the use of the property of the property of the property (aftech schedule as necessary.)  1. Has here been any change in the use of the property of the property of the property (aftech schedule as necessary)  1. Whom should we contact during normal business hours for additional information?  2. Whom should we contact during normal business hours for additional information?  3. Has here been any change in t	Yes No If YES	is the congregation of the church, religious d	=	embers?
each year for the property, or portion of the property so used, to be exempt.	specifically provide that the rental payments, or a refur one-twelfth of the property	e church exemption is taken into account in t id of such payments, if paid, for each month o	fixing the terms of agreement, the churc of occupancy (or use), or portion thereof,	h shall receive a reduction i during the fiscal year equal t
Note: Living quarters are not eligible for the Church or Religious-Exemptions. Certain living quarters may be exempt under the We Exemption. Contact the Assessor.  1. Is any portion of this property vacant and/or unused? Yes No If YES, describe that portion:  12. Has any portion of this property been rented to leased to or been used and/or operated by some person or organization other than the claisince 12:01 a.m., January 1 last year? Yes No a. If property is leased to another church, provide the name and mailing address:  CHURCH NAME  MAILING ADDRESS (NUMBER AND STREET/P O. BOX)  D. If property is leased to another church, provide the name and mailing address:  CHURCH NAME  MAILING ADDRESS (NUMBER AND STREET/P O. BOX)  D. If property is leased to an organization other than a church, provide the name, type of organization and frequency of use; attach additionable if necessary.  NAME  TYPE  FREQUE  Note: Property used by others (except for worship only) is not eligible for the Church Exemption. It may be exempt if the claimant (owner the user/operator both file a claim for the Welfare Exemption, Contact the Assessor.  3. Has there been any change in the use of the property or any construction commenced and/or completed on this property since 12:01 a.m., January 1 last year? Yes No If YES, describe:  4. Is any equipment or other property at this location being leased or rented from someone else?  Yes No If YES, list the name and address of the owner and the type, make, model, and serial number of the property. If the profisted is not used exclusively for religious worship, please state the other uses of the property (attach schedule as necessible is not used exclusively for religious worship, please state the other uses of the property (attach schedule as necessible is not used exclusively for religious worship, please state the other uses of the property (attach schedule as necessible is not used exclusively for religious worship, please state the other uses of the property (attach schedule as necessible is not				the Assessor by February 1
Exemption. Contact the Assessor.  If YES, describe that portion:    1. Is any portion of this property vacant and/or unused?   Yes   No   If YES, describe that portion:    2. Has any portion of this property been rented to, leased to, or been used and/or operated by some person or organization other than the clai since 12:01 a.m., January 1 last year?   Yes   No   No   A. If property is leased to another church, provide the name and mailing address:    CHURCH NAME	0. Is any portion of this prop	perty being <mark>us</mark> ed for liv <mark>ing</mark> qu <mark>art</mark> ers for any per	rson? If YES, describe that portion:	∕es <mark>☑ N</mark> o
12. Has any portion of this property, been rented to, leased to, or been used and/or operated by some person or organization other than the claisince 12:01 a.m., January 1 last year?   Yes   No a. If property is leased to another church, provide the name and mailing address:  CHURCH NAME  MAILING ADDRESS (NUMBER AND STREET/P. O. BOX)  b. If property is leased to an organization other than a church, provide the name, type of organization and frequency of use; attach addit sheets if necessary.  NAME  TYPE  FREQUE  Note: Property used by others (except for worship only) is not eligible for the Church Exemption. It may be exempt if the claimant (owner the user/operator both file a claim for the Welfare Exemption, Contact the Assessor.  13. Has there been any change in the use of the property or any construction commenced and/or completed on this property since 12:01 a.m., January 1 last year?   Yes   No If YES, describe:  Whom should we contact during normal business hours for additional information?  Whom should we contact during normal business hours for additional information?  Whom should we contact during normal business hours for additional information?  CERTIFICATION  ITTLE  CERTIFICATION  ITTLE	Exemption. Contact the As	ssessor.		pe exempt under the Welfard
since 12:01 a.m., January 1 last year?   Yes   No a. If property is leased to another church provide the name and mailing address:  CHURCH NAME  MAILING ADDRESS (NUMBERAND STREET/P. O. BOX)  b. If property is leased to an organization other than a church, provide the name, type of organization and frequency of use; attach additional inferessary.  NAME  TYPE  FREQUE  Note: Property used by others (except for worship only) is not eligible for the Church Exemption. It may be exempt if the claimant (owner the user/operator both file a claim for the Welfare Exemption, Contact the Assessor.  13. Has there been any change in the use of the property or any construction commenced and/or completed on this property 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 someone else?    Yes   No   If YES, list the name and address of the owner and the type, make, model, and serial number of the property. If the property is not used exclusively for religious worship, please state the other uses of the property (attach schedule as necession).  Whom should we contact during normal business hours for additional information?    Certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.	If YES, describe that port	ion:		_
MAILING ADDRESS (NUMBER AND STREET/P. O. BOX)  D. If property is leased to an organization other than a church, provide the name, type of organization and frequency of use; attach additional sheets if necessary.  NAME  TYPE  FREQUE  NAME  NAME  NAME  NAME  NAME  NAME  NAME  NAME  NOte: Property used by others (except for worship only) is not eligible for the Church Exemption. It may be exempt if the claimant (owner the user/operator both file a claim for the Welfare Exemption. Contact the Assessor.  13. Has there been any change in the use of the property or any construction commenced and/or completed on this property since 12:01 a.m., January 1 last year?  Yes No If YES, list the name and address of the owner and the type, make, model, and serial number of the property. If the property listed is not used exclusively for religious worship, please state the other uses of the property (attach schedule as necessible)  Whom should we contact during normal business hours for additional information?  NAME  CERTIFICATION  ITTLE  CERTIFICATION  TITLE  ITTLE	since 12:01 a.m., Januar	y 1 last year? ☐ Yes ☐ No		ization other than the claiman
b. If property is leased to an organization other than a church, provide the name, type of organization and frequency of use; attach additional sheets if necessary.  NAME    TYPE		another church, provide the name and mailing	g address:	<del>-</del>
Sheets if necessary.  NAME  NAME  NAME  NOte: Property used by others (except for worship only) is not eligible for the Church Exemption. It may be exempt if the claimant (owner the user/operator both file a claim for the Welfare Exemption. Contact the Assessor.  13. Has there been any change in the use of the property or any construction commenced and/or completed on this property 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 someone else?    Yes   No	MAILING ADDRESS (NUMBER	AND STREET/P. O. BOX)	CITY, STATE, ZIP CODE	
NAME  NOTE: Property used by others (except for worship only) is not eligible for the Church Exemption. It may be exempt if the claimant (owner the user/operator both file a claim for the Welfare Exemption. Contact the Assessor.  13. Has there been any change in the use of the property or any construction commenced and/or completed on this property 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 someone else?    Yes No If YES, list the name and address of the owner and the type, make, model, and serial number of the property. If the prolisted is not used exclusively for religious worship, please state the other uses of the property (attach schedule as necessing listed is not used exclusively for religious worship, please state the other uses of the property (attach schedule as necessing listed is not used exclusively for religious worship, please state the other uses of the property (attach schedule as necessing listed is not used exclusively for religious worship, please state the other uses of the property (attach schedule as necessing listed is not used exclusively for religious worship, please state the other uses of the property (attach schedule as necessing listed is not used exclusively for religious worship, please state the other uses of the property (attach schedule as necessing listed is not used exclusively for religious worship, please state the other uses of the property (attach schedule as necessing listed is not used exclusively for religious worship, please state the other uses of the property (attach schedule as necessing listed is not used exclusively for religious worship, please state the other uses of the property (attach schedule as necessing listed is not used exclusively for religious worship, please state the other uses of the property (attach schedule as necessing listed is not used exclusively for religious worship, please state the other uses of the property (attach schedule as neces		an organization other than a church, provide	the name, type of organization and frequ	uency of use; attach additiona
Note: Property used by others (except for worship only) is not eligible for the Church Exemption. It may be exempt if the claimant (owner the user/operator both file a claim for the Welfare Exemption. Contact the Assessor.  13. Has there been any change in the use of the property or any construction commenced and/or completed on this property 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 someone else?    Yes	<del></del>		ТУРЕ	FREQUENCY
the user/operator both file a claim for the Welfare Exemption. Contact the Assessor.  13. Has there been any change in the use of the property or any construction commenced and/or completed on this property since 12:01 a.m., January 1 last year?     Yes	NAME		TYPE	FREQUENCY
CERTIFICATION  Certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.  SIGNATURE OF PERSON MAKING CLAIM  TITLE	the user/operator both file  3. Has there been any char since 12:01 a.m., January  4. Is any equipment or othe  Yes No If YES,	a claim for the Welfare Exemption. Contact thinge in the use of the property or any construity 1 last year? Yes No If YES, described a property at this location being leased or rentist the name and address of the owner and the	ne Assessor.  uction commenced and/or completed on be:  ted from someone else?  ne type, make, model, and serial number	this property  of the property. If the property
DAYTIME TELEPHONE  ( )  CERTIFICATION  I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.  SIGNATURE OF PERSON MAKING CLAIM  TITLE				
CERTIFICATION  Certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.  SIGNATURE OF PERSON MAKING CLAIM  TITLE	Who	om should we contact during normal bu	siness hours for additional information	tion?
CERTIFICATION  Certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.  SIGNATURE OF PERSON MAKING CLAIM  TITLE	NAME		TITLE	
certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.  SIGNATURE OF PERSON MAKING CLAIM  TITLE	DAYTIME TELEPHONE	EMAIL ADDRESS		
certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.  SIGNATURE OF PERSON MAKING CLAIM  TITLE	. )	CERTIFIC		
SIGNATURE OF PERSON MAKING CLAIM  TITLE		enalty of perjury under the laws of the State of	f California that the foregoing and all info	
NAME OF DEDOON MAKING CLAIM		-	<u> </u>	-
MANIE OF FERSON MARING CLAIM LINE LAND	IAME OF PERSON MAKING CLAIM		DATE	

