EF-262-AH-R10-0519-25000189-1

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 "20

11-2012.")	
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)	
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Kristen DePaul **Modoc County Assessor**

204 Sout Court Street, Suite 106 Alturas, CA 96101

Phone: (530) 233-6218 Fax: (530) 233-6237 assessor@co.modoc.ca.us

	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	١		
□ c i	To receive the full exemption, this c neck here if you no longer seek an exempti			ssor.
NAME C	F CHURCH, ORGANIZA <mark>TIO</mark> N, ETC.		. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
WEBSIT	E ADDRESS (IF ANY)			
MAILING	ADDRESS (NUMBER AND STREET/P. O. BOX)			
CITY, ST	ATE, ZIP CODE			
ADDRES	S OF PROPERTY (NUMBER AND STREET)		ASSESS <mark>OR</mark> 'S PARCEL NUMBER	
CITY, CO	UNTY, ZIP CODE	V	DATE PROPERTY WAS FIRST USED BY	CLAIMANT
Clair and 2. Are a Y Y 3. Is the parkit common Y Common costs if the	er and operator: (check applicable boxes) nant is:	nd improvements and/or plely for religious worship, in use of these buildings? otion is claimed for parking in religious worship or religious worship or religious cles or bicycles, the revenue purposes. Leased property	purposes necessarily and reasonably requious activity, and which is not at other time	ired for the es used for I necessary
☐ Y b. Is an	an elementary school and/or secondary school being es No a children's day care center being operated at this lood infant care centers)?		e center includes licensed nursery schools, p	oreschools,
Note churc grad Relig	es No : If the answer is YES to a. or b. above, the property is n th and used for religious worship, preschool purposes, ni e (grades 1 - 12), or for the purposes of both schools of co ious Exemption. The Religious Exemption has a "one-time wish instead to annually file by February 15 for the Welfal	ursery school purposes, kinde ollegiate grade and schools of e filing" provision and should b	ergarten purposes, school purposes of less that less than collegiate grade, the claimant may qu	in collegiate ualify for the



7. Is the real property listed on	Is the real property listed on this claim owned by the church? Yes No If NO, state the name 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 another church, provide the name and mailing address: CHURCH NAME						
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			

