EF-262-AH-R09-0515-38000377-1 BOE-262-AH (P1) REV. 09 (05-15)

CHURCH EXEMPTION PROPERTY USED SOLELY FOR RELIGIOUS WORS



Joaquin Torres Assessor-Recorder

1 Dr. Carlton B. Goodlett Place City Hall - Room 190 San Francisco, CA 94102-4698

ERTY USED SOLELY FOR RELIGIOUS WORSHIP
This claim is filed for fiscal year 20 20
(Example: a person filing a timely claim in January 2011 wo

(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)				
[make necessary conrections to the printed name and maining address)	FOR ASSESSOR'S USE ONLY			
	Received			
	Approved			
	Denied Reason for denial			
To receive the full exemption, this claim must be file	ad with the Assessor by February 15			
☐ Check here if you no longer seek an exemption at this location. Sign and return this form to the Assessor.				
NAME OF CHURCH, ORGANIZATION, ETC.	1.5 4			
WEBSITE ADDRESS (IF ANY)				
MAILING ADDRESS (NUMBER AND STREET/P. O. BOX)				
CITY, STATE, ZIP CODE				
ADDRESS OF PROPERTY (NUMBER AND STREET)	ASSESSOR'S PARCEL NUMBER			
CITY, COUNTY, ZIP CODE	DATE PROPERTY WAS FIRST USED BY CLAIMANT			
Owner and operator: (check applicable boxes)				
Claimant is:				
and claims exemption on all 🔲 Land 🔲 Buildings and improvements	a <mark>nd</mark> /or ☐ Perso <mark>na</mark> l property			
Are all buildings and equipment claimed as exempt used solely for religious wo	rship, including any building in the course of construction?			
☐ Yes ☐ No				
3. Is the land claimed as exempt required for the convenient use of these building	s? Yes No			
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 p if the congregation of the church, religious congregation, or sect is no greater the	roperty used for 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 loca	tion?			
☐ Yes ☐ No				
b. Is a children's day care center being operated at this location (a children's cand infant care centers)?	ay 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 Churchurch and used for religious worship, preschool purposes, nursery school purposes grade (grades 1 - 12), or for the purposes of both schools of collegiate grade and sch Religious Exemption. The Religious Exemption has a "one-time filing" provision a claimant may wish instead to annually file by February 15 for the Welfare Exemption.	s, kindergarten purposes, school purposes of less than collegiate ools of less than collegiate grade, the claimant may qualify for the			

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



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EF-262-AH-R09-0515-38000377-2 BOE-262-AH (P2) REV. 09 (05-15)

7. Is the real property listed on this claim OWNER NAME	m owned by the church?	es No If NO, state the nam	e and address of owner:	
MAILING ADDRESS (NUMBER AND STRE	ET/P. O. BOX)	CITY, STA	ITE, ZIP CODE	
Note: The benefit of a property tax that the church exemption is take payments, or a refund of such payr one-twelfth of the property taxes not 9. Are bingo games being operated on each year for the property, or portion 10. Is any portion of this property being Note: Living quarters are not eligib Exemption. Contact the Assessor. 11. Is any portion of this property vacar If YES, describe that portion: 12. Has any portion of this property beer since 12:01 a.m., January 1 last years. If property is leased to another contact the Assessor. MAILING ADDRESS (NUMBER AND STREE MAILIN	rigregation of the church, religion YES, the property, or portion the exemption must inure to the en into account in fixing the ments, if paid, for each month paid during such fiscal year by this property? If YES, a claim of the property so used, to be used for living quarters for any le for the Church or Religious at and/or unused? Yes The rented to, leased to, or been used? Yes No hurch, provide the name and metallicity.	us denomination, or sect greated ereof, so used is not eligible for a church; if the lease or rental terms of agreement, the chu of occupancy (or use), or portion reason of the Church Exemption for the Welfare Exemption must exempt. Yes No person? If YES, describe that purchased and/or operated by some permailing address: CITY, STA	exemption. agreement does not specifically provide urch shall receive a reduction in rental on thereof, during the fiscal year equal to in. be filed with the Assessor by February 15 portion: Yes No parters may be exempt under the Welfare reson or organization other than the claimant	
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 FREQUENCY Note: Property used by others (except for worship only) is not eligible for the Church Exemption. It may be exempt if the claimant (owner) and 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? 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				
Whom should we contact during normal business hours for additional information? NAME TITLE				
DAYTIME TELEPHONE	EMAIL ADDRESS			
\ /	CERTI	FICATION		
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.				
SIGNATURE OF PERSON MAKING CLAIM	, , , , , , , , , , , , , , , , , , , ,	•	TITLE	
NAME OF PERSON MAKING CLAIM			DATE	

