EF-262-AH-R10-0519-43000225-1

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

CHURCH EXEMPTION

PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP

This claim is filed for fiscal year 20____ - 20___. (Example: a person filing a timely claim in January 2011 would enter "2011-2012.")



Lawrence E. Stone Santa Clara County Assessor

Exemption Division 70 W. Hedding St, East Wing, 5th Floor San Jose, CA 95110 Ph: (408) 299-6460 FAX: (408) 271-8812 exemptions@asr.sccgov.org www.sccassessor.org

NAME AND MAILING ADDR (Make necessary correction	RESS as to the printed name and mailing address)			
Γ		٦	FOR ASSESSOR'S	USE ONLY
			Received	
			Approved	
			Denied	
			Reason for denial	
L		ل		
	o longer seek an exemption		the Assessor by February 15. n and return this form to the A	ssessor.
WEBSITE ADDRESS (IF ANY)			9	
MAILING ADDRESS (NUMBER AN	ID STREET/P. O. BOX)			
CITY, STATE, ZIP CODE				
ADDRESS OF PROPERTY (NUME	BER AND STREET)		ASSESSOR'S PARCEL NUMBER	
CITY, COUNTY, ZIP CODE			DATE PROPERTY WAS FIRST USE	ED BY CLAIMANT
and claims exemption on a 2. Are all buildings and equip ☐ Yes ☐ No			☐ Perso <mark>na</mark> l property luding any building in the course of co	onstruction?
	mpt required for the convenient use	e of these buildings?		
☐ Yes ☐ No				
			ourposes necessarily and reasonably ous activity, and which is not at other	
☐ Yes ☐ No				
costs of operating and mai		urposes. Leased property us	of which does not exceed the ordinary sed for parking purposes is eligible for nembers.	
5. List all uses of the property	<i>/</i> :			
6. a. Is an elementary school	and/or secondary school being op	erated at this location?		
☐ Yes ☐ No				
 b. Is a children's day care and infant care centers)' 		tion (a children's day care c	center includes licensed nursery scho	ols, preschools,
☐ Yes ☐ No				
church and used for religiou grade (grades 1 - 12), or for	is worship, preschool purposes, nurs the purposes of both schools of colle	sery school purposes, kindergegiate grade and schools of le	nption. If the property is both owned and garten purposes, school purposes of lesess than collegiate grade, the claimant me filed by February 15; contact the Asses	ss than collegiate nay qualify for the

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? $\ \ \square$ Yes	☐ No If NO, state the name and address of owner:
OWNER NAME		
MAILING ADDRESS (NUMBER A	ND STREET/P. O. BOX)	CITY, STATE, ZIP CODE
Yes No If YES, is Yes Yes Yes Yes Yes Yes Yes Yes Yes Specifically provide that the crental payments, or a refund one-twelfth of the property ta lease or rental agreement. 9. Are bingo games being open each year for the property, or 10. Is any portion of this property.	No If YES, the property, or portion there erty tax exemption must inure to the church exemption is taken into account ir of such payments, if paid, for each month xes not paid during such fiscal year by rearted on this property? If YES, a claim for a portion of the property so used, to be extra to be used to be desired used for living quarters for any poor eligible for the Church or Religious E	rch; if the lease or rental agreement for any leased property does not fixing the terms of agreement, the church shall receive a reduction in of occupancy (or use), or portion thereof, during the fiscal year equal to ason of the Church Exemption. The assessor may request a copy of the the Welfare Exemption must be filed with the Assessor by February 15
11. Is any portion of this pr <mark>op</mark> er If YES, describe that portion	ty vac <mark>an</mark> t and/or <mark>un</mark> used <mark>? Yes No</mark> n:	
since 12:01 a.m., January 1	last year? Yes No nother church, provide the name and mail	d and/or operated by some person or organization other than the claimant ng address: CITY, STATE, ZIP CODE
b. If property is leased to ar sheets if necessary. NAME	n organization other than a church, provide	the name, type of organization and frequency of use; attach additional TYPE FREQUENCY TYPE FREQUENCY
the user/operator both file a 13. Has there been any chang since 12:01 a.m., January 1 14. Is any equipment or other part of Yes No If YES, list	claim for the Welfare Exemption. Contact e in the use of the property or any constitution of the property of any constitution of the property of the property of the property at this location being leased or retain the name and address of the owner and	ructi <mark>on</mark> com <mark>menced and/or co</mark> mpleted on this property ribe:
	n should we contact during normal b	usiness hours for additional information?
NAME		TITLE
DAYTIME TELEPHONE ()	EMAIL ADDRESS	•
()	CERTIFI	CATION
	alty of perjury under the laws of the State	of California that the foregoing and all information hereon, including any , and complete to the best of my knowledge and belief.
SIGNATURE OF PERSON MAKING CLAIM		TITLE
NAME OF PERSON MAKING CLAIM		DATE

