E-262-AH (P1) REV. 09 (05-15)	County Clerk-Recorder-Assessor P.O. Box 1255
CHURCH EXEMPTION PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP	Weaverville, CA 96093 Phone: (530) 623-1257 Fax: (530) 623-8398 assessor@trinitycounty.org
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)	FOR ASSESSOR'S USE ONLY
	Received
To receive the full exemption, this claim must be filed wi	ith the Assessor by February 15.
☐ Check here if you no longer seek an exemption at this location. S	
NAME OF CHURCH, ORGANIZATION, ETC.	
WEBSITE ADDRESS (IF ANY)	
MAILING ADDRESS (NUMBER AND STREET/P. O. BOX)	
CITY, STATE, ZIP CODE	
CITY, COUNTY, ZIP CODE	ASSESSOR'S PARCEL NUMBER DATE PROPERTY WAS FIRST USED BY CLAIMANT
Owner and operator: (check applicable boxes) Claimant is: Owner and operator Owner only Operator only and claims exemption on all Land Buildings and improvements and	l/or Personal property
 2. Are all buildings and equipment claimed as exempt used solely for religious worship, ☐ Yes ☐ No 	
3. Is the land claimed as exempt required for the convenient use of these buildings?	Yes No
4. Is all real property used by the church upon which exemption is claimed for parkir parking of automobiles of persons attending or engaged in religious worship or re commercial purposes?	
🗌 Yes 🗌 No	
Commercial purposes does not include the parking of vehicles or bicycles, the rever costs of operating and maintaining the property for parking purposes. Leased proper if the congregation of the church, religious congregation, or sect is no greater than 50	ty 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 location?	

- b. Is a children's day care center being operated at this location (a children's day care center includes licensed nursery schools, preschools, and infant care centers)?
- 🗌 Yes 🗌 No

Note: If the answer is YES to a. or b. above, the property is not eligible for the Church Exemption. If the property is both owned and operated by the church and used for religious worship, preschool purposes, nursery school purposes, kindergarten purposes, school purposes of less than collegiate grade (grades 1 - 12), or for the purposes of both schools of collegiate grade and schools of less than collegiate grade, the claimant may qualify for the Religious Exemption. The Religious Exemption has a "one-time filing" provision and should be filed by February 15; contact the Assessor. The claimant may wish instead to annually file by February 15 for the Welfare Exemption.

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



7. 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 AND STR	EET/P. O. BOX)	CITY, STATE, ZIP CODE	
		mination, or sect greater than 500 members?	
that the church exemption is tal payments, or a refund of such pay	ken into account in fixing the terms	; if the lease or rental agreement does not specifically of agreement, the church shall receive a reduction pancy (or use), or portion thereof, during the fiscal year of the Church Exemption.	in rental
	n this property? If YES, a claim for the N n of the property so used, to be exempt.	Velfare Exemption must be filed with the Assessor by Feb	oruary 15
10. Is any portion of this property beir	g used for living quarters for any person	? If YES, describe that portion: 🗌 Yes 🗌 No	
Exemption. Contact the Assessor.		tions. Certain living quarters may be exempt under the	Welfare
11. Is any portion of this property vaca If YES, describe that portion:	ant and/or unused? Yes No		
12. Has any portion of this property be since 12:01 a.m., January 1 last y		or operated by some person or organization other than the	claimant
	church, provide the name and mailing a	ddress:	
CHURCH NAME			
MAILING ADDRESS (NUMBER AND STR	REET/P. O. BOX)	CITY, STATE, ZIP CODE	
 b. If property is leased to an organ sheets if necessary. 	nization other than a church, provide the	name, type of organization and frequency of use; attach a	additional
NAME			QUENCY
NAME		TYPE	QUENCY
	ept for worship only) is not eligible for th or the Welfare Exemption. Contact the A	e Church Exemption. It may be exempt if the claimant (ow ssessor.	ner) and
	e use of the property or any constructio ear? Yes No If YES, describe:	n commenced and/or completed on this property	
Yes No If YES, list the na		rom someone else? pe, make, model, and serial number of the property. If the state the other uses of the property (attach schedule as new	
Whom sho	lld we contact during normal busin	ess hours for additional information?	
NAME			
DAYTIME TELEPHONE	EMAIL ADDRESS		

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 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

