



Yes  No Is the real property listed on this claim owned by the church? If NO, state the name and address of owner:

Owner name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Yes  No Is leased property, if any, used by the church for parking purposes? If YES, is the congregation of the church, religious denomination, or sect greater than 500 members?

Yes  No If YES, the property, or portion thereof, so used is not eligible for exemption.

**Note:** The benefit of a property tax exemption must inure to the church; if the lease or rental agreement does not specifically provide that the church exemption is taken into account in fixing the terms of agreement, the church shall receive a reduction in rental payments, or a refund of such payments, if paid, for each month of occupancy (or use), or portion thereof, during the fiscal year equal to one-twelfth of the property taxes not paid during such fiscal year by reason of the Church Exemption.

Yes  No Are bingo games being operated on this property? If YES, a claim for the Welfare Exemption must be filed with the Assessor by February 15 each year for the property, or portion of the property so used, to be exempt.

Yes  No Is any portion of this property being used for living quarters for any person? If YES, describe that portion:

\_\_\_\_\_  
**Note:** Living quarters are not eligible for the Church or Religious Exemptions. Certain living quarters may be exempt under the Welfare Exemption. Contact the Assessor.

Yes  No Is any portion of this property vacant and/or unused? If YES, describe that portion:

\_\_\_\_\_

Yes  No 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 claimant since 12:01 a.m., January 1 last year? If YES, describe:

\_\_\_\_\_  
If property is leased to another church, provide the name and mailing address:

\_\_\_\_\_  
**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.

Yes  No 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? If YES, describe:

\_\_\_\_\_

\_\_\_\_\_

Yes  No Is any equipment or other property at this location being leased or rented from someone else? If YES, list in the REMARKS section 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:

\_\_\_\_\_

\_\_\_\_\_

REMARKS

\_\_\_\_\_

\_\_\_\_\_

**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 and correct to the best of my knowledge and belief.*

SIGNATURE OF PERSON MAKING CLAIM ▶	DATE
NAME OF PERSON MAKING CLAIM	TITLE
EMAIL ADDRESS	DAYTIME TELEPHONE (     )