BOE-262-AH (P1) REV. 08 (05-14)

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.") NAME AND MAILING ADDRESS

(Make necessary corrections to the printed name and mailing address)						
L						

may wish instead to annually file by February 15 for the Welfare Exemption.



Carmen Chu, Assessor-Recorder Office of the Assessor-Recorder City and County of San Francisco 1 Dr. Carlton B. Goodlett Place, Room 190 San Francisco, CA 94102 www.sfassessor.org (415) 554-5596

FOR ASSESSOR'S USE ONLY

		Approved
L		Denied Reason for denial
To receive the full exemption, t	this claim must be filed with th	ne Assessor by February 15.
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
1. Owner and operator: (check applicable boxes) Claimant is:	dings and improvements and/or used solely for religious worship, include	☐ Personal property ding any building in the course of construction?
∵ Yes □ No	· ·	
4. Is all real property used by the church upon which parking of automobiles of persons attending or eng commercial purposes?		
☐ Yes ☐ No		
Commercial purposes does not include the parking of costs of operating and maintaining the property for p if the congregation of the church, religious congregation	parking purposes. Leased property use	ed 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 Yes No	being operated at this location?	
b. Is a children's day care center being operated at and infant care centers)?	this location (a children's day care ce	nter includes licensed nursery schools, preschools,
☐ Yes ☐ No		
Note : If the answer is YES to a. or b. above, the prope church and used for religious worship, preschool purpograde (grades 1 - 12), or for the purposes of both school Religious Exemption. The Religious Exemption has a "o	oses, nursery school purposes, kinderga ols of collegiate grade and schools of less	rten purposes, school purposes of less than collegiate

7. Is the real property listed on thi	-			
Yes No If NO, state the OWNER NAME	e name and address of owner:			
• · · · · = · · · · · · · · · · · · · ·				
MAILING ADDRESS (NUMBER AND	STREET/P. O. BOX)		CITY, STATE, Z	IP CODE
Yes No If YES, is the Yes Note: The benefit of a proper that the church exemption is payments, or a refund of such one-twelfth of the property taxe. 9. Are bingo games being operate each year for the property, or poly Yes No 10. Is any portion of this property Yes No Note: Living quarters are not Exemption. Contact the Assess. 11. Is any portion of this property Yes No If YES, description.	s taken into account in fixing the payments, if paid, for each month os not paid during such fiscal year by ed on this property? If YES, a claim for prition of the property so used, to be expected being used for living quarters for any eligible for the Church or Religious sor. I wacant and/or unused? I when rented to, leased to, or been used year?	reof, so used is not elichurch; if the lease terms of agreement of occupancy (or use) reason of the Church for the Welfare Exemptixempt. person? If YES, described the control of the Church for the Welfare Exemptixempt.	gible for exen or rental agre, the church , or portion the Exemption. ion must be fi tibe that portion living quarter	nption. eement does not specifically provide shall receive a reduction in rental tereof, during the fiscal year equal to siled with the Assessor by February 15
If property is leased to another CHURCH NAME	church, provide the name and mailing	g address:		
MAILING ADDRESS (NUMBER AND	TREET/P. O. BOX) CITY, STATE, ZIP CODE			
	(except for worship only) is not eligible im for the Welfare Exemption. Contact		nption. It may	be exempt if the claimant (owner) and
13. Has there been any change i since 12:01 a.m., January 1 la	-	struction commenced	and/or compl	eted on this property
☐ Yes ☐ No If YES, list th		d the type, make, mod	el, and serial	number of the property. If the property perty (attach schedule as necessary):
Whom s	hould we contact during normal	business hours for	additional in	nformation?
NAME				TITLE
DAYTIME TELEPHONE	EMAIL ADDRESS			
()	CEDTIE	FICATION		
		e of California that the		d all information hereon, including any knowledge and belief.
SIGNATURE OF PERSON MAKING CLAIM				[LE
NAME OF PERSON MAKING CLAIM			DA	TE
TO THE OF T ENGOIS WANTING CLAUV			DA	ML.