



EXEMPTIONS APPLICATION LINE BY LINE INSTRUCTIONS

Please note the following:

- 1) Places of public worship may have at most one residential unit on site for use by that property's religious leader or caretaker; and
- 2) If the property is vacant or under construction **DO NOT** apply; you are not eligible. You may reapply when the property is fully occupied.

Follow these instructions carefully when completing the application. Additional pages may be attached to this form if necessary:

1. Write the name of the organization as it appears on the Certificate of Incorporation.

2. Write the address of the property applying for exemption.

3. Write the Block and Lot Number/DEP Account No:

4. Write the daytime telephone number of the property, including area code. If there is no one there during the day provide a number where a representative can be reached.

5. Write the name/title of the individual applying on behalf of the organization.

6. State whether the organization owns or leases the property. If leased (the lease **MUST** be for a minimum of three years) you must submit a copy of the lease with your application. If the request for exemption is based on the category "Place of Public Worship", the property "must be owned by the same religious corporation using the premises and be used exclusively as a place of public worship."

7. State how long the organization owned the property and occupied it for an exempt purpose.

8. Describe any commercial use or any commercial portion of the building:

9. If the organization owns the property state whether the property is for sale:

10. Categorize your organization to be considered for an exemption by selecting the appropriate type eligible from the list of 16 categories provided with the application. **If your organization does not fall into one of these 16 categories DO NOT APPLY – APPLICATIONS WILL BE DENIED.**



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Follow these instructions carefully when completing the application:

11. Describe all activities conducted on or at the property, including those conducted by other organizations. Please be specific.

12. What kind of educational instruction is offered? Please state what grades are taught.

13. Please describe any religious instruction being offered on or at the property.

14. Are there any tuition charges? If yes, please describe the amount:

15. Are there any medical or surgical services available? If yes, please explain:

16. How many members or patrons are in the organization locally? _____

17. What is the age range of the members or patrons? _____

18. Describe all sources of employee salaries: _____

19. Describe all sources of revenue received by your organization:

| Source | % of Revenue |
|--------|--------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

20. NOTARIZATION: Subscribes and sworn to before me this _____ day of

_____ 20____, _____

Notary Stamp

**21. _____
Applicant's Signature**