MUSCOGEE COUNTY BOARD OF TAX ASSESSORS Request for Property Tax Exemption

Own	er's Name (l	PLEASE PRINT)	Address	City	State	Zip	
INST	RUCTION	S: Under Georgia law all pro	operty is taxable unless specifically	exempted under OCGA 48-5-41 (items 1-15), 48-	5-470.1 (item 16), o	r 48-5-470.2
(item	17). Check	THE ONE category below t	hat you believe fits the primary use	of this property:			
	,	Public property					
	(1)(D)		onprofit corporation whose income is	exempt from federal income tax an	d <u>held exclusiv</u>	ely for the benefit of	a county,
		municipality, or school distric	xt	1			
	(2)	All places of burial					
	(2)(A)	All places of religious worshi	p				
	(2.1)(A)		operated exclusively as a church, a		urches, a conver	ntion mission agency	y, or as an
		integrated auxiliary of the san	ne when such entity is qualified as an	exempt religious organization			
	(3)		ous groups and used only for single-	family residences with no income	derived from the	e property	
	(4)	All institutions of purely pub					
	(5)		pitals used in connection with their o	peration and not held for investme	nt purposes <u>and</u>	are subject to the l	<u>aws</u> of this
		state regulating nonprofit or c					
	(6)		used as a college, incorporated acader				
\Box	(7)		used as endowment by colleges, non	profit hospitals, incorporated acad	emies or other s	eminaries of learning	g <u>when</u> the
_		funds or property are not inve					
	(8)		when used by or connected with any				C 1
	(9)	/1 1 11	ratus, paintings, and statuary of any co	ompany or association kept in a pu	blic hall and not	held as merchandise	e for sale or
_	(10)	gain					
	(10)	Reserved	h is a part of any facility which has b	oon installed or constructed at any	time for the nuin	nami numnasa of alia	ninating or
	(11)		n <u>if</u> such facilities have been certified				ninating of
	(12)		ome for the aged used in connection				a ar profit
	(12)		efit of any private person and when t				
		Revenue Code, Section 501(c		the nome is quantied as an exemp	t organization u	nuer une Onneu Star	ies internar
	(13)		ome for the mentally disabled used in	connection with its operation whe	n the home has r	o stockholders and	there is no
	(15)		and when the home is qualified as				
		501(c)(3)	and when the nome is quanted as	an enempt organization ander the	onnea blateb i		ae, 500000
	(14)(A)		and used exclusively as the headquart	ers, post home, or similar facility of	a veterans organ	ization when at least	75 percent
-			nt, are members of the armed forces of				
	(14)(B)	Property which is owned by a	nd used exclusively by any veterans of	rganization which is qualified as a	nonprofit 501 (c)(3) organization and	which has
_		been organized for the purpos	e of refurbishing and operating histor	ic military aircraft acquired from th	e federal govern	ment and other sourc	es, making
			utting such aircraft on display to the p		e		, U
			cal benefit association whose foundin		from the Genera	l Assembly of Georg	gia prior <u>to</u>
		January 1, 1880 and used ex	clusively for charitable, fraternal, and	benevolent purposes		-	
	(16)	A housing project that is subj	ect to a private enterprise agreement v	vith a housing authority			

<u>Complete this sheet and attach</u> the applicable questionnaire(s) as provided by the Board and which is a part of this request. Answer each question using additional sheets of paper as necessary. If this request is for more than one parcel, <u>all used for the same purposes</u>, attach a list of the other parcels. If it is for more than one parcel, <u>not all used for the same purposes</u>, attach a list of the other parcels. If it is for more than one parcel, <u>not all used for the same purposes</u>, attach a list of the other parcels. If it is for more than one parcel, <u>not all used for the same purposes</u>, fill out a questionnaire for each parcel. Submit this request and questionnaire(s), (no facsimiles), <u>by April 1, of the year that you have indicated above</u>, to: The Muscogee County Board of Tax Assessors, P.O. Box 1340, Columbus, GA 31902. Extra requests can be obtained by calling the office at 706-653-4398 or by going to our web site: <u>http://www.columbusga.org/TaxAssessors/</u>

<u>APPLICANT'S OATH:</u> I hereby apply for tax exemption, under the subparagraph of OCGA 48-5-41 (a) indicated above, for the property described in the attached questionnaire(s) and the <u>year indicated above</u>. I certify that I am duly authorized to represent the owner in this matter and that, to the best of my knowledge and belief, all information contained herein and attached is true and correct.

Applicant's name (printed)	Title	Correspondence Mailing Address	City	State	ZIP	
Signature		Date	Telephone No.	Fa	x No.	
E-mail Address Revised 6/14/16		Web-site				

MUSCOGEE COUNTY BOARD OF TAX ASSESSORS Questionnaire for a Place of Religious Worship

Name	`owner:
Parcel	D: Personal Property Account No(s) Attach copy of reporting form.
Locati	a (address) of property:
Date a	uired:
1.	s the owner exempt from federal income tax? If yes, please attach a copy of the IRS ruling.
2.	What is the specific use of the land and each improvement (bldgs.) located on the property as of January 1 for the Tax Year requested?
3.	s the property ever used for any unrelated purposes? If yes explain in detail.
4.	in the past calendar year was any part of the property rented or used to produce revenue other than voluntary donations? If yes, blease explain.

- 5. Is any income distributed to any persons other than that which is distributed for the normal operation of the worship facility?
- 6. Are there any deed restrictions on the property? _____ If yes, explain in detail.
- 7. Is there a cell tower or billboard on the property? _____ If yes, indicate which. _____

To assist the Board in making its decision, please attach copies of the following documents in addition to the ones requested above which relate to the owner or the property: articles of incorporation, bylaws, financial statements, deeds, plats, pictures (inside & outside), personal property reporting form, informational brochures and certificates of occupancy. Also, please attach any other information which you believe will help to establish that the property is exempt from taxation.

Name of preparer (Printed)	Signature	Date	TEL. No.
(Frinted)			Revised 6/14/16