



APP NO.	-
FILE NO.	-
COUNTY	

## Application for Exemption of Property Form A – All Applicants

Before you fill out the application forms, carefully review the information on the preceding instruction page. **Failure to properly complete and submit your application may result in its rejection, substantial delays or denial of the requested exemption.**

**1. Property owner (as on deed or title)**

Name
Address
Daytime Phone

**2. Contact**

Name
Address (if different than in Section 1)
Daytime Phone (if different than in Section 1)
Email Address (optional)

**3. County in which property is located**

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**4. Type of property (check one or both)**

← REAL (land, buildings, mobile homes, leasehold improvements, possessory interest)	← PERSONAL (furniture, equipment, and other moveable items not affixed to land or buildings)
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**5. Physical location or street address of property (Please attach directions to the property.)**

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**6. Legal description of REAL property, as on assessment records/deed (use attachments as needed)**

(check if continued/attached) →	

**7. Key dates (Month/Day/Year)**

7.A. Date of acquisition (as on deed or title)	7.B. Date actual use for exempt purposes began	7.C. Date construction or renovation began
/ /	/ /	/ /



### 13. History

Name of prior property owner (if known)			
Has your organization previously applied for property tax exemption in Colorado?	YES →	<input type="checkbox"/>	NO →
If YES above: County	File No.	Owner name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

14. **Required** document attachments (include all for the owner, and check as done; otherwise explain. If applying for exemption as a charitable child care center, include documents for the user only, if different from the owner.)

A.	<input type="checkbox"/>	← ALL organizational documents (e.g. Articles of Incorporation/Organization, Bylaws, Partnership Agreement) If you are certain that <u>current</u> copies of the above are already on file with our office, so note in D below.
B.	<input type="checkbox"/>	← Financial statements, to include balance sheet and operating statement, for the owner's last fiscal year
C.	<input type="checkbox"/>	← Annual report, and/or any published brochures explaining the owner's organization and activities
D. Explaining missing document attachments:		<input type="text"/>
<input type="text"/>		

15. Required forms (check all applicable categories; complete and attach each noted supplemental form)

<input type="checkbox"/>	← School (39-3-107, C.R.S.)	Form C
<input type="checkbox"/>	← Licensed Health Care Facility (39-3-108(1)(b), C.R.S.)	Form D
<input type="checkbox"/>	← Domestic Water Company (39-3-108(1)(c), C.R.S.)	Form E
<input type="checkbox"/>	← Amateur Sports Organization (39-3-108(1.3), C.R.S.)	Form F
<input type="checkbox"/>	← Community Corrections Facility (39-3-108.5, C.R.S.)	Form G
<input type="checkbox"/>	← Child Care Center (39-3-110, C.R.S.)	Form H
<input type="checkbox"/>	← Fraternal or Veterans Organization (39-3-111, C.R.S.)	Form I
<input type="checkbox"/>	← Health Care Services – Non-licensed facility occupied by physician/dentist (39-3-111.5, C.R.S.)	Form J
<input type="checkbox"/>	← Charitable Purposes – Non-residential* (39-3-108(1)(a), C.R.S.) <b>(use if other categories do not apply)</b>	Form K
<input type="checkbox"/>	← Charitable Purposes – Residential* (39-3-109, 112, 112.5 and 113, C.R.S.)	Form L
<input type="checkbox"/>	← Housing Provider for Future Low-income Buyers (39-3-113.5, C.R.S.)	Form M
<input type="checkbox"/>	← Community Land Trusts or Nonprofit Affordable Homeownership Developers (39-3-127.7, C.R.S.)	Form O
* "Residential" means average occupancy exceeds 90 days.		

### 16. Signature and verification

<i>I declare, under penalty of perjury in the second degree, that I have examined this application, including any accompanying statements and documents, and to the best of my knowledge and belief, it is true, correct and complete.</i>			
Signature	<input type="text"/>	Date (Month/Day/Year)	<input type="text"/> / <input type="text"/> / <input type="text"/>
	Printed Name		Title
	<input type="text"/>		<input type="text"/>

