

EXEMPT PROPERTY APPLICATION

County _____

Digest Year _____

Name Shown On Digest: _____

TitleHolder: _____

Property Address or Identifying Data: _____

Exemption Code: Land _____ Improvements _____

FAIR MARKET VALUE: Land \$ _____ Improvements \$ _____ Total \$ _____

Assessed Value: Land \$ _____ Improvements \$ _____ Total \$ _____

A. General Nature Of Operation:

**B. Is the property itself, land and improvements, dedicated to and used EXCLUSIVELY
For purely public charity? [] YES [] NO**

C. Please explain the specific uses of this property: _____

D. What percent of the property is actively used for the exempt purpose? _____%

E. To whom are the facilities available, other than the general public? _____

F. Is income received from any portion of this property?

[] YES [] NO [] PART [] ALL

A. What is the nature of the income, if any? _____

B. If income received, how is it used?

**I HEARBY CERTIFY THAT THIS INFORMATION IS TRUE AND CORRECT TO THE BEST OF
MY KNOWLEDGE.**

DATE: _____

SIGNED: _____

If not owner, position of preparer: _____