COBB COUNTY BOARD OF TAX ASSESSORS Application for Property Tax Exemption

Requested Tax Year(s):

Owner's Name (P	LEASE PRINT)	Address			City	State	Zip	
c/o Me 736 W	obb County Boa eagan Knight hitlock Ave, Sui ta, Georgia 300							
		axable unless specifically ex tegory below that you belic			5-470.1 (item 16), o	or 48-5-470.2 (item 1	17).	
(1)(A)	Public propert	hv						
(1)(D)	Property held	by a Georgia nonprofit o bunty, municipality, or so		come is exempt from	m federal income	e tax and <u>held exc</u>	lusively for the	
(2)	All places of b							
(2)(A)	All places of r	All places of religious worship All property owned by and operated exclusively as a church, an association or convention of churches, a convention mission						
(2.1)(A)	agency, or as	an integrated auxiliary o	f the same when suc	h entity is qualified	as an exempt re	ligious organizati	on	
(3)	All property owned by religious groups and used only for single-family residences with no income derived from the proper All institutions of purely public charity							
(4) (5)	All property of	f nonprofit hospitals <u>use</u> laws of this state regula	d in connection with			estment purposes	and are	
(6)		erected for and used as a				rning		
(7)	All funds or property held or used as endowment by colleges, nonprofit hospitals, incorporated academies or other se							
		nen the funds or property						
(8)	All real and pe	ersonal property when us	sed by or connected	with any public libra	ary, or any other	literary association	on	
(9)		losophical apparatus, pa	intings, and statuary	of any company or	association kep	t in a public hall a	and not held as	
(10)	merchandise i	for sale or gain						
(11)		sed in or which is a part	of any facility which	has been installed o	or constructed at	any time for the	nrimary	
(11)	purpose of eli	minating or reducing air he purposes intended						
(12)		f a nonprofit home for th	e aged used in conn	ection with its opera	ation when the ho	ome has no stock	holders and no	
		fit distributed to or for th						
		ınder the United States I						
(13)		f a nonprofit home for th						
		and there is no benefit to		and when the home	is qualified as a	n exempt organiz	ation under the	
(4.4)(4)		Internal Revenue Code,						
(14)(A)		h is <u>owned by and used</u>						
		75 percent of the member		ire members of the	armed forces of	tne United States	and there is no	
(14)(B)		private shareholders or h is owned by and used		ntorono organization	a which ic gualifi	ad as a nannrafit	E01 (a)(2)	
(14)(D)								
	organization and which has been organized for the purpose of refurbishing and operating historic military aircraft acquired from the federal government and other sources, making such aircraft airworthy, and putting such aircraft on display to the							
		cational purposes	. courses, making ou	on an oran an worth	y, and paring of	on an orant on ano	play to the	
(15) (16)		ed by an historical benef	it association whose	founding organizat	ion received its	charter from the C	Seneral	
	Assembly of C	Georgia <u>prior to January</u>	1, 1880 and used exc	lusively for charital	ble, fraternal, and	d benevolent purp	oses	
	Vehicles owne	ed by a school or educat	ional institution and	used <u>exclusively</u> for	r transporting <u>pe</u>	rsons with disabi	lities or	
	disabled stude	ents <u>to or from</u> educatio	nal institutions when	the institution(s) is	qualified as an e	exempt institution		
(17)	Vans and buse	es <u>owned by</u> religious gr	oups and used <u>excl</u> u	<u>ısively</u> for:				
	(b) transpo	ntaining and operating e orting individuals to relig	ious services, OR	, , ,				
	(c) trips sp	onsored by the religious	group designed to p	promote religious, e	ducational or ch	aritable purposes		
(18)	A housing pro	ject that is subject to a p	orivate enterprise agr	eement with a hous	sing authority			
Complete this	sheet and attac	the applicable question	nnaire(s) as provide	d by the Board and	which is a part o	f this application.	Answer each	
question using	additional she	ets of paper as necessa	ry. If this application	is for more than on	ne parcel, all use	d for the same pu	rposes, attach	
		t is for more than one pa						
this applicatio	n and questionr	naire(s), (no facsimiles),	by April 1, of the year	r that you have indic	cated above.		-	
Evtra	annlications car	n be obtained by calling th	ne office at 770-528-3	100 or by going to o	ur web site: wow	cobbassessor or	a	
		, ,					-	
		apply for tax exemption,						
		stionnaire(s) and the <u>yea</u> my knowledge and belie					ier iii tiiis	
Applicant's na	me (printed)	Title Corre	espondence Mailing	Address	City	State	Zip	
Cianatura			Data	Dhone No		Fox No		
Signature			Date	Phone No.		Fax No.		
E-mail Addres	•		Wob-sit-	•		D	ovisod 12/17/19	

COBB COUNTY BOARD OF TAX ASSESSORS

Application for Property Tax Exemption

Questionnaire for a Non-profit Home for the Aged Parcel ID: ______ Personal Property Account No(s). _____ Attach copy of reporting form. Location (address) of property: Date acquired: Is the owner qualified as an exempt organization under the United States Internal Revenue Code, Section 501(c)(3)? ______ If yes, please attach a copy of the IRS ruling and most recent IRS Forms 990 and 990T. Does the owner have a business license? ______ Please provide a copy. What is the specific use of each improvement (bldgs.) located on the property as of January 1 for the tax year requested? Is this property restricted/limited or reserved for the use of any specific person(s), groups(s), or organizations? ______ If yes, give detailed explanation. What are the age and income requirements for a person to be eligible to live at the home? Are services, provided after acceptance, contingent on an applicant's ability to pay? ______ If yes, give detailed explanation. Is any income distributed to stockholders or individuals? _____ If yes, give detailed explanation. Is any incidental income received from non-rent use of the property? ______ If yes, give detailed explanation. Has exemption from ad valorem taxation ever been denied for this property? ______ If yes, give detailed explanation. 10. Are there any deed restrictions on the property? ______ If yes, give detailed explanation. 11. 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, fee schedule 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 Signature Date Phone No. (Printed)