

Name of Property Owner As of 01/01/2020 _____

Do ALL Charitable/Educational activities take place on RE parcels listed on this application:

YES NO If "No" Please explain on separate attachment

Is RE property zoned for intended use? YES If "Yes" Please list RE property parcel Class(s): _____
NO If "No" Please submit your plan of action for zoning acceptance.

TYPE OF PROPERTY TAX EXEMPTION YOU ARE APPLYING FOR:

REAL PROPERTY: (Idle, vacant, unimproved property parcel(s) are not eligible for tax exemption)
Uniform Property Code number(s): (UPC) Real Property – Example: 1-012-012-123456-12345

(1) _____ (2) _____
(3) _____ (4) _____
(5) _____ (6) _____

(If additional parcels apply, please list on Page (4))

PERSONAL PROPERTY (Business Equipment):
(Business equipment includes office machines, equipment, furniture, other moveable items) **Attach Itemized List**
Uniform Property Code number(s): (UPC) Personal Property – Example: (last six digits) 623456

(1) _____ (2) _____ (3) _____ (4) _____

MANUFACTURED HOME: (Include copy of title/registration – LIST ADDITIONAL INFORMATION ON PAGE (4))
Uniform Property Code number(s): (UPC) Manufactured Home – Example: (last six digits) 423456

(1) _____ (2) _____ (3) _____ (4) _____

Actual STREET Address or LOCATION of Real Property, Bus Equipment or Mfg Home:

(Use Page (4) or Additional Sheet if Necessary)

OTHER ORGANIZATIONAL INFORMATION:

01. Applicant organization is the: 1. OWNER of the Real Property/Improvements/Personal Property or Mfg Home
2. OWNER of the: Personal Property (Business Equipment)
 Manufactured Home AND LEASES the Office Space/premises/real property.

02. Who **currently** owns land parcel(s)? _____
(Copy of current owner document should be included)

03. Who **currently** owns the Improvement(s)? _____
(Copy of current owner document should be included if applicable)

04. Who **currently** owns the Personal Property (Business Equipment)? _____
(Owner Equipment Certification Letter/Equipment List & Copy of RE Lease (if applicable) or RE Deed should be included)

05. Who **currently** owns the Manufactured Home(s)? _____
(MVD Title/registration and other required information on Page 4 should be included)

06. Were any improvements under construction as of January 1st of 2020 for which a tax-exempt status is claimed?
 YES NO Not Applicable

07. If question 06 is answered YES, furnish date construction commenced: _____ (Attach copy of Building Permit)
and projected date of completion _____ (Attach copy of Certificate of Occupancy if applicable).

08. Describe intended use of newly constructed improvements: _____

09. Does the organization engage in long term activities other than those for which exemption is sought and are the activities:
 Political Social Fraternal Not Applicable
(Please explain in detail on separate sheet if political, social or fraternal)

10. List square feet, percentage, ACTIVITY and hours used EACH DAY OF A SEVEN DAY WEEK for each area of the improvements & land that are used for charitable and/or educational purposes as well as footage and percentage NOT used: _____

11. How is the applicant organization supported financially? _____

12. Will the applicant organization rent, lease or sub-lease on a long-term basis a portion of this property to generate income?
 YES NO (If "Yes", what %: _____ Size: _____ (provide copy of rent or lease agreement)

13. List organization income from all sources per month. \$ _____

14. Is the applicant organization filing IRS Report Form 990 each year? YES NO
(If "NO" enclose IRS authorization letter stating you are not required to file)

15. Explain all reasons why this property is educational or charitable as these terms are utilized in the New Mexico Constitution, Article VIII, Section 3
Please include a narrative description of the activities presently carried on by the organization. The narrative should specifically identify the services performed to benefit the public at large or the community by the organization. List definition of recipient classes (Ex: low-income, homeless, indigent, or charitable organizations ,etc.) receiving your services.

(Use additional sheets and attach supporting documentation if necessary)

PROPERTY OWNER OATH OR AFFIRMATION

I hereby certify that the subject property(s) are owned by a charitable and/or educational organization and is being used for charitable and/or educational purposes.

Signature of property owner or *AUTHORIZED AGENT

Date

Please print name of person signing above

Title

***Letter of Authorization to Agent from Owner is Required**

