



# Elk County Assessment Office

P.O. Box 448 • Ridgway, PA 15853-0448 • Phone: (814) 776-5340

Tyler A. Daniels, Chief Assessor

Matthew G. Quesenberry Sr, Commissioner

Richard R. Brown, Solicitor

M. Fritz Lecker, Commissioner  
Gregory Gebauer, Commissioner

## APPLICATION FOR REAL PROPERTY TAX EXEMPTION

### **I. PROPERTY INFORMATION**

- A. PROPERTY PARCEL NUMBER: \_\_\_\_\_
- B. PROPERTY LOCATION: \_\_\_\_\_
- C. PORTION OF PROPERTY FOR WHICH EXEMPTION IS CLAIMED:

\_\_\_\_\_

\_\_\_\_\_

### **II. OWNER INFORMATION**

- A. NAME: \_\_\_\_\_
- B. ADDRESS: \_\_\_\_\_
- C. TELEPHONE: \_\_\_\_\_

### **III. COMPLIANCE**

DESCRIBE STATUTORY BASIS FOR EXEMPTION (see Pennsylvania Statutes Title 72 P.S. Taxation and Fiscal Affairs § 5020-204. Exemptions from taxation)

A. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- B. IF CORPORATION, DESCRIBE STATUS – (profit, nonprofit) AND ATTACH COPY OF ARTICLES

\_\_\_\_\_

\_\_\_\_\_

- C. ATTACH EXECUTED AFFIDAVIT OF COMPLIANCE (see attached)

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_

## **EXEMPTION APPLICATION RULES**

### **Please check each item included and label accordingly**

All entities seeking a grant of exempt status from taxation in accordance with the Pennsylvania Statutes Title 72 P.S. Taxation and Fiscal Affairs § 5020-204. Exemptions from taxation

1. shall submit the following documentation as may be applicable:
  - a. Proof of non-profit status granted by the Commonwealth of Pennsylvania.
  - b. Appropriate revenue service ruling letter granting the exempt status.
  - c. Copies of appropriate income tax returns filed with the Internal Revenue Service, if any, for the immediate three (3) years preceding the date for the exemption request; if no IRS forms are available then Income & Expense Statements for the past three (3) years shall be filed.
  - d. Copies of all organizational documents, by-laws and most recent amendments.
  - e. A list of the current Board of Directors or other governing body together with a verified statement that none of the income of the alleged non-profit entity inure to the benefit of any individual shareholder, incorporator, member of the Board of Directors or other governing body (other than salaried employees), unless the documentations set forth herein above contains such a statement in the Articles of organization or amendments thereto; in the latter event, a brief reference to the sections should be noted with the submission of such documents.
  - f. In the event the tax returns submitted (or if there are no such tax returns) failure to disclose the amounts of salaries and wages paid, then the applicant shall submit a verified statement of the current salaries and wages paid to all officers, directors and the five (5) highest salaried employees of the non-profit corporation, or other governing body.
  - g. A copy of the deed or document of title; whereby the applicant obtained the property in question; in the event no such copy is available, then a reference to the deed or document along with a verified statement containing the same information as herein set forth.
  - h. A brief verified statement detailing the current use of property; in addition, the applicant may, at its option, include a statement of the prospective use of the property.
  - i. Any other documentation, which may be required or requested by the Board.
  - j. The information required may be set forth in one cumulative verified statement.
2.  If the application is signed by an officer or employee of the corporation seeking exemption, then a verified statement of authorization of such officer or employee or such other appropriate authorization, shall accompany the application.

3.  Where applicable, the applicant should submit a brief statement of the law whereby the applicant feels it is entitled to exempt status with specific reference to the statutory section or sections cited, or otherwise pertinent under the laws of the Commonwealth.
4.  In the event any of the requirements of Section 1, sub-paragraph (a through j) are not presented, the applicant should be prepared to submit as to the reasons why such documentation is not available or is not submitted.
5.  At the option of the applicant, original documents may be submitted for such purposes of permitting copies to be made and all such original documents will then be returned to the applicant. All such copies made by the applicant, or copies, as the case may be, shall become a permanent part of the file of the Assessment Office of Elk County.
6.  In the event any portion of the property for which exemption is sought, is leased by the applicant or otherwise permitted to be used by any other entity other than the applicant, then applicant shall submit a copy of such lease(s) or brief statement concerning the permissive use arrangement. Such lease copies or statements shall contain the identity of the lessee or user; the amount of rent or other consideration paid by such lessee or user; the terms of such lease or permissive use; and all other items pertinent thereto.

In the event that some of the originally filed exhibits have been updated or amended, then the applicant shall submit such updated or amended documents as soon as available.

**Please check each item included and label accordingly.**



# Elk County Assessment Office

P.O. Box 448 • Ridgway, PA 15853-0448 • Phone: (814) 776-5340

Tyler A. Daniels, Chief Assessor

Richard R. Brown, Solicitor

Matthew G. Quesenberry Sr, Commissioner

M. Fritz Lecker, Commissioner

Gregory Gebauer, Commissioner

## AFFIDAVIT OF COMPLIANCE

I, the undersigned, being duly sworn according to law, depose and say that I am, the owner/representative of the real property for which tax-exempt status has been applied for, that the information contained in the attached application is true and correct, and that immediate notice of change of ownership or use of said property shall be given to the Elk County Assessment Office.

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

Company: \_\_\_\_\_

Signature: \_\_\_\_\_

If Corporation: \_\_\_\_\_  
Corporation Name                      President                      Secretary

State of \_\_\_\_\_

County of \_\_\_\_\_

This record was acknowledged before me on \_\_\_\_\_ (date)

by \_\_\_\_\_ (name of individual).

Signature of notarial officer \_\_\_\_\_ Stamp

Title of office \_\_\_\_\_

My Commission Expires \_\_\_\_\_