

DEPARTMENT OF REVENUE AND TAXATION REAL PROPERTY TAX DIVISION GOVERNMENT OF GUAM P.O. BOX 23607, BARRIGADA GUAM 96921

() EDUCATIONAL

( ) **RELIGIOUS** 

( ) ELEEMOSYNARY

I, \_\_\_\_\_\_ as owner (or authorized representative), hereby submit this tax exemption affidavit in conformance to §24401©, Chapter 24, Title 11, GCA, for the real property listed for taxation;

## TAX ASSESSMENT INFORMATION

Primary Identification Number (PIN):	
Legal Parcel Description:	
Situs Address (Street # & Name):	
Utilized as (i.e. church; sports field, etc):	
LEGAL OWNER Name(s):	
TIN or SSN (for SSN, last 4 digits only):	
Mail Address:	

- > Must attach a copy of the approved exempt certificate issued by the Department of Revenue and Taxation.
- If the applicant is not the owner, a copy of the written agreement (between owner and organization) of such exclusive use must be attached also.

A claim for exemption must be filed with the assessor listing the property involved and, must be filed on before the fifteenth  $(15^{th})$  day of March of each year for which the exemption is claimed, except that once a claim is filed it shall have continuing effect as a new claim for the exemption for each subsequent year, unless it is disallowed or voided.

Oath: I, the undersigned applicant hereby submit this application for property tax exemption for the above-checked category, and certify under penalty of law that the information contained in this application is true and correct to the best of my knowledge.

Print Name & Title	Signature	Date
For office only		
Verified by:	I	Date:
Recommended for: ( ) APPROVAL (	) DISAPPROVAL	

Administrator, Real Property Tax Division