

## ADDENDUM APPLICATION FOR EXEMPTION FROM PROPERTY TAXATION

This addendum application is to be used by nonprofit organizations seeking property tax exemption for additional real property pursuant to Section 170 of the Kentucky Constitution. **The organization listed hereon has been granted property tax exemption for real property under separate application currently on file in the \_\_\_\_\_ County Property Valuation Administrator's Office. The organization listed hereon must be the same organization as previously granted exemption, not a subsidiary entity or related organization.**

<b>Name:</b>	_____
	Exact Legal Name of Organization
<b>Address &amp; Parcel ID of Current Exempt Property</b>	_____
	Number & Street _____ City _____ State _____ Zip Code _____
	Parcel Identification #: _____
<b>Address of Additional Property for Which Application is Made</b>	_____
	Number & Street _____ City _____ State _____ Zip Code _____
	Parcel Identification #: _____ (Leave blank if unknown)
<b>Mailing Address of Organization (Applicant)</b>	_____
	P.O. Box / or Number & Street _____
	City _____ State _____ Zip Code _____
<b>Current Use &amp; Occupancy of Additional Property</b>  * Required *	_____ _____ _____
<b>State of Incorporation</b>	State: _____ <input type="checkbox"/> Nonprofit <input type="checkbox"/> Nonstock <input type="checkbox"/> Other _____
<b>Please Check Type of Exemption</b>	<input type="checkbox"/> Public Property <input type="checkbox"/> Place of Burial <input type="checkbox"/> Institution of Education <input type="checkbox"/> Institution of Purely Public Charity <input type="checkbox"/> Institution of Religion
<b>Applicant Signature</b>	I hereby certify that the statements and information contained hereon are correct to the best of my knowledge and belief, and that the purpose of the organization as described in the application currently on file in the Jefferson County Property Valuation Administrator's Office has not changed, and that I am authorized to sign this application.  Applicant Name / Title (Please Print): _____  Phone Number: (_____) _____ Email _____  Applicant Signature: _____ Date: _____
<b>To Be Completed by PVA Office</b>	Recommendation: _____  Signed: _____ Date: _____