BEFORE THE BOARD OF TAX APPEALS OF THE STATE OF KANSAS

TAX EXEMPTION (K.S.A. 79-213)

APPLICANT:			
	(For State of Kansas use only)		
Applicant Name (Owner of Record)			
Applicant Address (Street or Box No.)			
City State Zip	DOCKET NOTX		
Applicant Phone #:()			
Applicant E-mail:	Fee: Amt Rec		
ATTORNEY OR REPRESENTATIVE: (If applicable)*	Rec. Date: Ck #		
	No Fee: Reason:		
Representative Name Title			
Representative Address			
	(For County use only)		
City State Zip			
Atty/Rep Phone #:()	Parcel ID #/Personal Property ID # or Vehicle ID #:		
Representative E-mail:			
Taxing County:	County's valuation: \$		
Year/Years at issue:	LBCS Function Code:		
Property at issue: Real PropertyStreet address, city:			
Personal PropertyDescription:			

acqui	onal Property—For personal property, provide an itemized list of all items, including the isition date(s) and any legal documentation of ownership. (If the description is lengthy, ional pages to this form.)
If su	abject property is a vehicle, please complete one of the following forms:
	(1) Addition to Exemption Application Vehicles Form
	or (2) Addition to Exemption Application Active Military Personnel Vehicles Form
	rsonal property, where was the property located on January 1 of the year you request the aption to begin? (Provide the street address, city, county and state.)
Is the	e subject property leased?NoYes If yes, attach a copy of the lease agree
Indic	ate all uses you make of the subject property: (Explain in detail).
Indic	ate how often you use the subject property for this purpose(s).
	ate all other individuals, groups or organizations that use the subject property. Explain each individual or entity uses the property.

10.	Date (mm/dd/yyyy) you acquired ownership or	f subject property:
	Date (mm/dd/yyyy) the property was first used	for exempt purposes:
	Date (mm/dd/yyyy) you are requesting the exe	emption to begin:
	Date (mm/dd/yyyy) construction commenced a	and ended*:
	*(If property is new construction)	
11.	Which statute authorizes the exemption:	
12.	Do you request a hearing on the application fo	r exemption?YesNo
	<u>VERIF</u>	<u>ICATION</u>
	, do solemnly nd correct, to the best of my knowledge and believed.	y swear or affirm that the information set forth herein is ef. So help me God.
		Signature of Applicant
		Printed Name and Title
State (Count	of	
This i	nstrument was acknowledged before me on	by
Seal		Signature of Notary Public
Му ар	ppointment expires:	

is

COUNTY APPRAISER RECOMMENDATIONS AND COMMENTS

TO COUNTY APPRAISER:

Pursuant to K.S.A. 79-213, and amendments thereto, the County Appraiser is required to review each application and recommend whether the relief sought should be granted or denied. Therefore, please answer the following questions and provide any additional comments you believe are necessary to support your recommendation. The County Appraiser shall provide a copy of the completed comments and recommendations to the applicant.

1. Do you find the facts as stated by the appli	icant represent the true situation?_	Yes	_No
2. Do you recommend that the exemption her	rein requested be granted?	Yes	No
3. Do you request a hearing on this application	on?	Yes	No
Indicate the year the County first placed the su tax rolls under the name of the current			-
Please provide any additional comments as to the Cour	nty's position regarding the applica	ant's request.	_
			-
	ICATION		-
I,, do solemnly true and correct, to the best of my knowledge and believed.		tion set forth h	erein i
	Signature of County Official		-
	Printed Name and Title		-
State of) County of)			
This instrument was acknowledged before me on	by		_•
Seal	Signature of Notary Public		
My appointment expires:			

TAX EXEMPTION INSTRUCTIONS

- 1. Each application for tax exemption must be filled out completely with all accompanying facts and attachments. The statement of facts must be in affidavit form. Applications or statements that have not been signed by the property owner before a Notary Public will not be considered. Pursuant to K.S.A. 79-213, and amendments thereto, the property owner is required to file the application. If the subject property is leased, the lessee can **not** file the application.
- 2. If you are applying for exemption pursuant to the following statutes, please provide the indicated additions to application.
 - K.S.A. 79-201 Ninth---Humanitarian service provider TX Addition 79-201 Ninth
 - K.S.A. 79-201 <u>Seventh</u>—Parsonage TX Addition 79-201 Seventh
 - K.S.A. 79-201b---Hospitals, adult care homes, children's homes, etc. TX Addition 79-201b
 - K.S.A. 79-201g---Watershed dam or reservoir TX Addition Watershed
 - K.S.A. 79-201k---Business aircraft or K.S.A. 79-220---Antique aircraft TX Addition Aircraft
 - K.S.A. 79-201t---Low producing oil lease TX Addition 79-201t
 - K.S.A. 79-201z---Community Housing Development Organizations TX Addition 79-201z
 - K.S.A. 79-5107(e) or 50 U.S.C.A. § 571

 TX Addition to Exemption Application Active Military Personnel Vehicles
- 3. Pursuant to Kansas law, the burden is on the applicant to prove affirmatively that relief is necessary. Failure to do so will result in the denial of the request for exemption.
- 4. Enclose any applicable filing fee(s) pursuant to K.A.R. 94-5-8. Checks or money orders should be made payable to the Board of Tax Appeals. For information regarding fees with the Board of Tax Appeals, visit www.kansas.gov/bota/ or contact the Board at (785) 296-2388. The County Appraiser's office also has fee schedules available.

This form along with the applicable additions and attachments is to be filed with the County Appraiser for recommendations pursuant to K.S.A. 79-213(d). The County Appraiser will forward the application to the Board of Tax Appeals.