

APPLICATION FOR PROPERTY TAX EXEMPTION

For Rural Health Care Facility

Exemption for _____ tax year

• **File with your county assessor on or before April 1.**

See Oregon Laws 2001, Chapter 642.

FOR ASSESSOR'S USE ONLY						
Date Received						
Organization Name				Account No.		Late Filing Fee
Organization Address			Telephone Number ()		\$	
City		State	ZIP Code		<input type="checkbox"/> Approved <input type="checkbox"/> Denied Exemption begins in tax year 20 ____ - ____	
Name of Applicant					Telephone Number ()	
Mailing Address (if other than organization address)				City	State	ZIP Code
PROPERTY DESCRIPTION						
Assessor's Account Number (as shown on property tax statement)				Name of Property Owner		
Property Address (street address, city)						
FACILITY INFORMATION						
Attach a copy of resolution or ordinance.						
Date construction, erection, or installation is to start: _____						
Date facility will be in service to provide medical service: _____						
PERSONAL PROPERTY						
Personal property is machinery and equipment which is readily movable. It is generally unattached in any way to a building or structure and is also not connected to other real property machinery and equipment. Attach additional pages if necessary.						
Owned / Leased <small>(check one)</small>	Make / Model / Type	Serial Number	Purchase Date	Purchase Price	Date Installed	Date In Use
<input type="checkbox"/> <input type="checkbox"/>						
<input type="checkbox"/> <input type="checkbox"/>						
REAL PROPERTY MACHINERY AND EQUIPMENT						
Real property machinery and equipment is machinery that is not easily movable. Machinery and equipment means any property used in the business activity or process except land, buildings, and structures. It does not include furniture, commercial fixtures, or structural components of a building such as standard wiring, plumbing, heating or cooling systems. Attach additional pages if necessary.						
Owned / Leased <small>(check one)</small>	Make / Model / Type	Serial Number	Purchase Date	Purchase Price	Date Installed	Date In Use
<input type="checkbox"/> <input type="checkbox"/>						
<input type="checkbox"/> <input type="checkbox"/>						
BUILDINGS AND STRUCTURES						
New building or structure and addition to or modification of an existing building or structure: (check one)						
<input type="checkbox"/> Own <input type="checkbox"/> Lease <input type="checkbox"/> Both—Describe: _____						
LATE FEE						
If this form is filed after April 1, the late filing fee must accompany the form. The late filing fee is one-tenth of one percent of the real market value, or \$200.00, whichever is greater . A late fee is attached: <input type="checkbox"/> Yes <input type="checkbox"/> No						
DECLARATION						
I declare under the penalties for false swearing [ORS 305.990(4)] that I have examined this document (including any accompanying attachment and statements) and to the best of my knowledge it is true, correct, and complete.						
Name (please print or type)			Title	Signature	Date	
				X		