

Exempt Property Checklist

BLOCK: _____ LOT: _____ QUALIFIER: _____

OWNER NAME: _____

PROPERTY LOCATION: _____

ADDITIONAL LOTS: _____

TOTAL NUMBER OF PROPERTIES: _____

- DEED/OWNERSHIP DOCUMENTS
- INSURANCE POLICY ON PROPERTY
- ARTICLES OF ASSOCIATION
- AUDITED FINANCIAL STATEMENTS – IRS 990
- CHARTER AND/OR MISSION STATEMENT
- ITINERARY/CALENDER OF EVENTS
- LEASE/RENTAL AGREEMENTS
- CERTIFICATE OF INCORPORATION
- CONSTITUTION AND BY-LAWS
- TAX RETURNS
- ORGANIZATION'S PROMOTIONAL LITERATURE
- ADDENDUM CONTAINING ANY OTHER PERTINENT INFORMATION
- DOCUMENTED LISTING OF ALL EMPLOYEE ANNUAL SALARIES
- DAILY/WEEKLY/MONTHLY CHILDCARE TUITION RATES (IF APPLICABLE)

Initial Statement Date: _____

Further Statement Date: _____

Further Statement 1st Request Date Sent: _____

Further Statement 2nd Request Date Sent: _____

IS/FS Notes: _____

Additional Notes:

Reviewed By: _____ Date: _____