Harris Central Appraisal District
Exemption Center
13013 Northwest Fwy.
P. O. Box 922012
Houston, TX 77292-2012
(713) 957-7800

Application for Nonprofit Water Supply or Wastewater Service Corporation Property Tax Exemption

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FORM 11.30(01/2012)

This application covers property you owned on January 1 of this year, or acquired during this year. You must file the completed application between January 1 and no later than April 30 of this year. If you acquire the property after January 1 of this year and wish to qualify for the exemption this year, you must apply before the first anniversary of the date you acquired the property, or before the first anniversary of the date any property was acquired after January 1. Be sure to attach any additional documents requested. If the chief appraiser grants the exemption, you do not need to reapply annually, but you must reapply if the chief appraiser requires you to do so, or if you want the exemption to apply to property not listed in this application. You must notify the chief appraiser in writing if and when your right to this exemption ends. If you have filled out this form online, you must print it, sign it, and mail it to the address above.

* You are required to give us this information on this form, in order to perform tax related functions for this office. Section 11.43 of the Tax Code authorizes this office to request this information to determine tax compliance.

| Step 1. Name and Address of Organization | | |
|--|--|---|
| Na | ame of Organization | |
| Pre | esent Mailing Address (number and street) | |
| Ci | ty, Town or Post Office, State, ZIP Code | Phone(area code and number) |
| Na | ame of Person Preparing this Application Driver's License, Personal I.D., Certificate, or Social Security Number* | Title |
| Or | rganization is operated by: (please check) | Corporation |
| | is application is for an exemption from ad valorem taxation of property owned by a charitable organization number, that number may be provided here in lieu of a driver's license number, personal identification cer number: | |
| | nless the applicant is a charitable organization with a federal tax identification number, the applicant's drive identification certificate number, or social security account number is required. Pursuant to Tax Code Secund number, personal identification certificate number, or social security account number provided in an applicate chief appraiser is confidential and not open to public inspection. The information may not be disclosed to the appraisal office who appraises property, except as authorized by Tax Code Section 11.48(b). If the applicant as identification number, the applicant may provide the organization's federal tax identificate license number, personal identification certificate number, or social security account number. | tion 11.48(a), a driver's license cation for an exemption filed with a anyone other than an employee of oplicant is a charitable organization |
| 1. | If operated by a corporation, is the corporation organized under Article 1434a, Tex. Rev. Civ., Stat.? | 1. Yes No |
| | Step 2. Answer These Questions About the Organization | |
| 2. | Attach a list of salaries and other compensation for services paid in the last year. Also, list any shareholders or directors in the last year. In each case, give recipient's name, type of service rend amounts paid. | |
| 3. | In the past year has the organization loaned funds to, borrowed funds from, sold property to or bought from a shareholder, director or member of the organization, or has a shareholder or member sold his in the organization for a profit? | |
| | a. If "Yes," attach a description of each transaction. For sales, give buyer, seller, price paid, value of the property sold and date of sale. For loans, give lender, borrower, amount borrowed, interest rate and term of loan. Attach a copy of note, if any. | |
| 4. | If operated by a corporation, is the corporation nonprofit as defined by the Texas Non-Profit Corpor (Article 1396, Tex. Rev. Civ. Stat.)? | ation Act |

| Step 3. Answer These Questions About the Organization's By-Laws and Charter | | | |
|---|---|---|------------------------|
| 5. | If the | ne organization is a corporation, does the corporation's charter provide: That no dividends shall ever be paid on the corporation's stock? | a. Yes No |
| | b. | That all profits arising from the operation of the corporation's business must be paid e cities, towns, counties, other political subdivisions, private corporations and other peduring the past year, transacted business with the corporation, in direct proportion to the business transacted? | rsons who, |
| | c. | | c. Yes No |
| | d. | That the corporation's directors may allocate the amount of annual profits they find are no maintenance, upkeep, operation and replacements? | ecessary for d. Yes No |
| 6. | ren | the bylaws of the organization provide that on dissolution of the organization the organization that disting after discharge of the corporation's indebtedness shall finally be transferred to an atter supply or wastewater service, or both, that is exempt from property taxation? | entity that provides |
| Step 4. Answer These Questions about the Organization's Property | | | |
| 7. | ls t | ne organization's property used to acquire, treat, store, transport, sell or distribute water? | 7. Yes No |
| 8. | ls t | ne organization's property used to provide wastewater service? | 8. Yes No |
| | | Step 5. Describe Your Property | |
| | rop | erty To Be Exempt | |
| | • | Attach one Schedule A (Real Property) form for EACH parcel of real property to be exemple Attach one Schedule B (Personal Property) form listing ALL personal property to be exelust only property owned by the organization. | |
| Step 6. Sign the Application | | | |
| | By signing this application, you designate the property described in the attached Schedules A and B as the property against which the exemption for nonprofit water supply or wastewater service corporation may be claimed in this appraisal district. | | |
| | • | You certify that this information is true and correct to the best of your knowledge and believed | f. |
| On | beha | lf of (name of organization) | Date |
| sigi | | ed Signature sign | Title |

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Schedule A: Description of Real Property

• Complete one Schedule A form for **EACH** parcel qualified for exemption.

| | | - | | |
|---|----------------------|-------------------|---------------------|------------|
| • | Attach all completed | I schedules to yo | our application for | exemption. |

HCAD Account Number(Optional)

Tax Year

| Name of Owner | | | |
|--|--|----------------------------|----------------------|
| Legal Description of Property (also attach copy of deed(s)) | | | |
| | | | |
| 1. Describe the primary use of this property. | | | |
| 2. Is this property currently under active construction or physical pr | reparation? | | 2 .Yes No |
| a. If you answered "Yes," to this question, please answer | the following questions: | | |
| i. If under construction, when will construction be | e completed? (date) | | |
| ii. If under physical preparation, check which a (Check all that apply.) | activity the organization h | as done. | |
| Architectural Work Land Clearing Acti | ivities | | |
| ☐ Engineering Work ☐ Site Improvement | Work | | |
| Soil Testing Environmental or I (Please attach all | Land Use Study supporting documentation | n) | |
| 3. Is the incomplete improvement designed and intended to be us of acquiring, treating, storing, transporting, selling or distributing | | | |
| 4. Does any portion of this property produce income? | | | 4. Yes No |
| a. If "Yes," attach statement describing use of the revenue. | | | |
| 5. Is the land on which the incomplete improvement is located ready qualified youth development associations/organization? | asonably necessary for the | | |
| 7. List all other individuals and organizations that used this property in t | the past year, and give the r | equested information for e | ach. |
| a. Name | b. Dates Used | c. Activity | d. Rent Paid, If Any |
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Schedule B: Description of Personal Property

• List all tangible property to be exempt on this schedule.

| Attach all completed schedules to your application for exemption. | HCAD Account Number (optional) |
|---|--------------------------------|
| Name of Owner | |
| I. Is this property reasonably necessary for operation of the association/organization? | |
| a. Item | b. Location |
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Tax Year