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City of Dover Office of City Assessor EXEMPTION APPLICATION

Property Owner Name	Date	Date					
• • • •	Phone No.						
Email		FIIO	iie ivo				
Property Address	Parcel No.						
Current Status (check only one)							
Government (including public school	s)	Charita	ible	_			
Religious		Educat	ional	_			
Parkland							
Other (please describe)							
Documentation required: Initials:							
1Form – Exempt-1 (Exemptic	-1 (Exemption Application) 4IRS 990 (most current)						
2Papers of Incorporation							
3Copy of 501(c)3		(pleas	e attach as se	parate docume	nt)		
 Is any part of this property duration of rental period(s), period and all other information. Is there a fee schedule for used. Is there a product or service. I HEREBY AFFIRM THAT ALL INFORMATION. Signature and Title	rent collected for solition pertinent to the second facilities or reconsold at this propert	uch period, add is issue. ceipt of services y? If YES, pleas	tional expens If YES, attacl e explain.	e reimbursemer n fee schedule.	•		
Data Bassiyadı		ICE USE ONLY	Vant Caunty	Evenntion, V/N	.1		
Date Received:	Staff Reviewer:		Kent County	Exemption: Y/I	V		
RECOMMENDATION Board of Assessment Appeals:							

Email: ahart@dover.de.us Phone # 302-736-7022

APPROVAL PROCESS

City Council: