



POLK COUNTY  
Property Appraiser  
Neil Combee

R. 06/2025  
ADA Compliant

**AD VALOREM TAX EXEMPTION APPLICATION AND RETURN**

DR-504 Attachment / Document Checklist

Organization Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Business Phone: \_\_\_\_\_

**INCORPORATION**

- 1. Is your organization incorporated?  YES  NO
- 2. Have you attached your articles of incorporation?  YES  NO
- 3. Have you attached a copy of your IRS determination letter?  YES  NO

*Example: 501(c)(2), 501(c)(3), 501(c)(12), etc.*

- 4. **REQUIRED IF NO ABOVE:** If you answered **NO** to ANY of the above, please provide your Constitution, Articles of Assn, Declaration of Trust – **OR** – a statement (below or attached) indicating your organizations aim / purpose.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PROPERTY**

- 1. Is any of your property rented or leased?  YES  NO
- 2. Is any of your property used for non-exempt purposes?  YES  NO
- 3. Have you attached a copy of all active rental/lease contracts?  YES  NO
- 4. **REQUIRED:** Please provide a detailed explanation of how the property is used (below or attached) and include affirmative steps if necessary. Provide Details of any and all non-exempt use of the property. See definition of affirmative steps below.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Affirmative Steps refers to documented or photographed proof of activities that demonstrate a commitment of the property to a religious use as a house of public worship. Examples include architectural plans or schematic drawings; construction or renovation activities; land clearing or site preparation. Public worship activities include religious worship, educational activities, parking, recreation, partaking of meals, and fellowship.*

- 5. If the organizations property includes a residential structure (home, mobile home, etc.) will the sale of the residential structure be distributed for one or more exempt purposes?  YES  NO
- 6. **REQUIRED:** Please provide a statement (below or attached) indicating to what degree the proceeds of the sale, lease, or other disposition of the organization's property will inure to the benefit of the organization's members, directors, or officers.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SALARY STATEMENT**

YES  NO Does the organization pay any salaries, fees, loans, gratuities, etc. for its operation – **OR** – to any officer, director, trustee, member or stockholder, etc.?

**IF YES - ATTACHMENT REQUIRED:** Please attach a document(s) with all salaries, fees, etc.

**IF NO - STATEMENT REQUIRED:** Please initial the statement below or provide a similar statement:

I certify, under penalty of perjury, this organization **DOES NOT** pay any salaries, fees, loans, gratuities, etc. for its operation – **OR** – to any officer, director, trustee, member, etc.

\_\_\_\_\_  
INITIALS



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**LOAN STATEMENT**

\_\_\_\_ YES \_\_\_\_ NO Does the organization have any mortgages, liens, or encumbrance payments for the property --OR-- guarantees of any loan to or any obligation to any officer, director, trustee, etc.?

**If YES - ATTACHMENT REQUIRED:** Please attach a document(s) with all loans / obligations.

**If NO - STATEMENT REQUIRED:** Please initial the statement below or provide a similar statement:

I certify, under penalty of perjury, this organization **DOES NOT** have any mortgages, liens, or encumbrance payments for the property – **OR** – guarantees of any loan to or any obligation to any officer, director, trustee, member, etc.

\_\_\_\_\_  
INITIALS

**SERVICE CHARGE STATEMENT**

\_\_\_\_ YES \_\_\_\_ NO Does the organization charge for any of its services?

**If YES - ATTACHMENT REQUIRED:** Please attach a document(s) with all all service charges.

**If NO - STATEMENT REQUIRED:** Please initial the statement below or provide a similar statement:

I certify, under penalty of perjury, this organization **DOES NOT** charge for any services.

\_\_\_\_\_  
INITIALS

**CONTRACTS STATEMENT**

\_\_\_\_ YES \_\_\_\_ NO Does the organization have any contracts between the organization and any officer, director, trustee, member, etc. pertaining to rendition of service, provision of good/supplies, management of the organization, construction / renovation of the organization?

**If YES - ATTACHMENT REQUIRED:** Please attach a document(s) with all contracts / agreements.

**If NO - STATEMENT REQUIRED:** Please initial the statement below or provide a similar statement:

I certify, under penalty of perjury, this organization **DOES NOT** have any contracts between the organization and any officer, director, trustee, member or stockholder, etc.

\_\_\_\_\_  
INITIALS

I hereby certify, under penalty of perjury, that all information provided on this form and any attached documents, spreadsheets, statements, schedules, etc., are true and correct to the best of my knowledge as of January 1 of this year.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**PLEASE NOTE: The property appraiser may require additional information to determine your eligibility for the exemption requested.**

Please email the completed [DR-504 Exemption Application](#) along with this DR-504 Attachment / Document Checklist – AND – all supporting documentation to [paexemptions@polk-county.net](mailto:paexemptions@polk-county.net).