CITY OF VALDEZ, ALASKA

COMMUNITY PURPOSE EXEMPTION APPLICATION

All applicable questions must be answered fully. If a question is not applicable, mark N/A. Decision upon the requested exemption will be made after consideration of the information set forth by the applicant upon this form. Misrepresentation or false statements made in conjunction with an application for exemption is a misdemeanor and is subject to criminal penalties. This form must be notarized or it will not be accepted. A separate application must be made for each tax parcel. **This application must be filed by January 15th of each assessment year for which the exemption is sought.**

TAX YEAR: 2020

Organization Name: Valdez Fisheries Development Association, Inc.

Property Description 1561 Dayville Rd- Tract B ATS 1140

Tax Parcel Number: 11400000020

Determination Criteria

1. Form of Organization (i.e. a lawful corporation) Yes __X__ No_____

2. Is your organization nonprofit/non-business   Yes __X__ No_____

3. Percentage of property that qualifies under this exemption by being used exclusively for community purpose. <u>Membership use or participation must be open to and not be limited or restricted to anyone within the scope of the community.</u>   __100__ %

4. Percentage of property used for profit purposes __0__ %

5. Explain why your organization qualifies for this community purpose exemption:

   VFDA is a non-profit 501c3 fish hatchery located within the city limits

Signature of Applicant _____

Title: Executive Director   Date 1/3/20

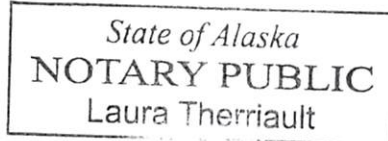Contact Telephone Number: (907) 835-4874

Land only: 500

Tax: 10   BR
1/23/2020

This is to certify that on this ___3rd___ day of ___January___, 20 _20_, before me, the undersigned Notary Public in and for the State of Alaska, personally appeared ___Mike Wells___ known to me to be the person (s) named in the foregoing application, or having produced suitable evidence of identification, and who executed the foregoing application, and who did acknowledge to me that he/she signed the same freely and voluntarily for the uses and purposes therein stated.

WITNESS my hand and Notarial Seal the day and year last written above.

Laura Therriault
Notary Public in and for Alaska
Commission Expires: _2/21/21_.

State of Alaska
NOTARY PUBLIC
Laura Therriault

EXEMPTION GRANTED _____   EXEMPTION DENIED_____

If denied, please explain: _____

CITY OF VALDEZ, ALASKA

_____   _____
Mayor   Date Approved

ATTEST:

_____
City Clerk