Name of organization	BOE-269 VE AS	9-FIR-R02-0308-13000326-1 9-FIR REV. 02 (03-08) ETERANS' ORGANIZATION EXEMPTION SSESSOR'S FIELD INSPECTION REPORT REGULAR ASSESSMENT SUPPLEMENTAL ASSESSMENT prmation for Property NoYear:	CHARLE COLLEGE	940 W. Main Str El Centro, CA 9 Main Office: (44 Website: assess	unty Assessor eet Suite 115 2243	
Address of this property	Na	me of organization				
Owner only Owner-Operator Date of last inspection of property If claimant is operator, name of owner is	Ad	dress of <i>this</i> property				
If claimant is owner, name of owner is A Claimant is pointary: (check only one) 1. charatable 2. other (explain) B. Use of property 1. The primary activity the property is used for is: (check only one) a. administration b. fragemal and lodge meetings b. commercial b. hospital c. educational b. hospital c. educational b. hospital c. educational b. hospital c. educational c. hospital d. farming n. housing d. farming n. housing d. farming n. housing d. farming c. nexcess of that reasonably necessary d. All or part (write fiel all or part where significable) of the property is: a. leased or noticed b. vacant or unused c. in excess of that reasonably necessary d. nyour opinon do operations enhance anyone's private gain? d. used to house previces and expenses excessive? 1. In your opinon do operations enhance anyone's private gain? Yes No fanswer is yee, explain: Yes D. Ownership of real property (as of applicable lien		Owner only Operator only Owner-Operator	Date of last insp	city, zip code) ection of property		
If claimant is operator, name of owner is A. Claimant is primary. (check only one) 1. The primary activity the property is used for is: (check only one) a. administration e frademal and lodge meetings b. commercial of third raising c. educational of third raising d. farming of third raising m. other (explain) information 2. Other activities the property is used for are: a. List letters used in B1 b. Other fexplain) of the rais of the fail or part where applicable of the property is: a leased or refuel b. vacant or unused: of an institutionally necessary c. In excess of that reasonably necessary d. used to house presonel whose presence is not institutionally necessary? 1. In your opinion are services and expenses accessive? Yes No if answer is yoe, explain: Yes No 2. Other activities the claimant's proposed new capital investment, frany, necessary? Yes No if answer is no, explain: Did owner file an exemption claim? Yes No if answer is no, explain: Did owner file an exemption claim? Yes No 1. Dyour ophion of new construction Recorded Yes No 1. Date of change in ownership <t< td=""><td></td><td></td><td></td><td></td><td></td></t<>						
A Claimant is primarily: (check only one) 1. charitable 2. other (explain) B Use of property 1 The primary activity the property is used for is: (check only one) 2 administration e frademal and lodge meetings The medical (not hospital) 2 b. commercial e, h. hospital i. h. rehabilitation 3 d. farming h. h. indusing i. informational 4 d. diarming h. h. indusing i. informational 5 Other activities the property is used for are: a. List letters used in B1 b. other(explain) 6 Other explain: c. nexcess of that reasonably necessary d. used to house personnel whose presence is not institutionally necessary 7 Operation of property for benefit of persons y. vacant or unused g. nexcess of the reasonably necessary? Yes No 1 In your opinion do reparations enhance anyone's provaes provaes any services and expenses excessive? Yes No 1 In your opinion do perations enhance anyone's provaes any Yes No 2 In your opinion do operations enhance anyone's provaes any? Yes No 3 In your opinion d						
1. The primary activity the property is used for is: (check only one) a. administration if fund raising. b. commercial if g. ind raising. c. educational if g. ind raising. c. other cervitiles the property is used for are: a. List letters used in B1 b. Other(explain) 3. All or part (write in all or pat where applicable) of the property is: a leased or rented b. vacant or unused c. n excess of that reasonably necessary c. Operation of property for benefit of persons 1. In your opinion are services and expenses excessive? c. No ersthip for real property (as of applicable lien date) is recorded in exact name of claimant f answer is no, explain: c. In your opinion is the claimant s proposed new capital investment		Claimant is primarily:				
a. administration e fratemal and lodge meetings f. medical (not hospital) b. commercial f fund raising f. fratemal in the function of the property is recordional c. educationation g. hospital f. fratemal informational d. farming in. housing informational d. farming in. housing informational d. d. farming informational informational d. d. or part (write in all or patt where applicable) of the property is: e. leased or rented d. used to house presence is not institutionally necessary d. used to house presence is not institutionally necessary Yes l. In your opinion is the claimant's proposed new capital investment. If any, necessary? Yes l. In your opinion is the claimant's proposed new capital investment. If any, necessary? Yes D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant Yes J. Date of change in ownership g. as of anal? Recorded	В.	Use of property				
b. commercial f. f. fund raising j. recreational c. educational g. hospital h. housing m. other (explain) in housing h. housing 2. Other activities the property is used for are: a. List letters used in B1		1. The primary activity the property is used for is: (check	(only one)			
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 All or part (write in all or part where applicable) of the property is: a. leased or rented b. vacant or unused c. in excess of that reasonably necessary d. used to house personnel whose presence is not institutionally necessary C. Operation of property for benefit of persons 1. In your opinion are services and expenses excessive? if answer is yee, explain: 2. In your opinion is the claimant's proposed new capital investment, if any, necessary? if answer is yee, explain: 3. In your opinion is the claimant's proposed new capital investment, if any, necessary? if answer is no, explain: D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant if answer is no, explain: D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant if answer is no, explain: D. Ownership in name of claimant? Did owner file an exemption claim? Yes No Supplemental Assessment (in claimant's name): 1. Date of change in ownership E. Supplemental Assessment (in claimant? 2. Date of completion of new construction Explain what was constructed 3. Date put to exempt use th only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail 4. Notice: date mailed 5. Date claim for veterans' organization exemption on this property: 1. was filed last year Yes No 2. was not filed last year was not filed last year in the super port y located at (and complete address including zip code) (and for veterans' organization exemption on this property: 1. was filed last year, but claimed on another property located at (and for veterans' organization exemption on this property: 1. was filed last year, but claimed on another property located at<		2. Other activities the property is used for are: a. List letters used in B1				
b. vacant or unused c. in excess of that reasonably necessary d. used to house personnel whose presence is not institutionally necessary C. Operation of property for benefit of persons In your opinion are services and expenses excessive? vess In your opinion are services and expenses excessive? vess vess No If answer is yes, explain: vess vess vess No 3. In your opinion is the claimant's proposed new capital investment, if any, necessary? vess No if answer is no, explain:						
1. In your opinion are services and expenses excessive? Image: second secon		b. vacant or unused c. in ex	xcess of that reas			
2. In your opinion do operations enhance anyone's private gain? Yes No If answer is yes, explain:		1. In your opinion are services and expenses excessive?			Yes No	
3. In your opinion is the claimant's proposed new capital investment, if any, necessary? Yes No If answer is no, explain:		2. In your opinion do operations enhance anyone's privat	e gain?		Yes No	
D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant Yes No If answer is no, explain:		3. In your opinion is the claimant's proposed new capital	investment, if any	y, necessary?	🗌 Yes 🗌 No	
E. Supplemental Assessment (in claimant's name): Recorded Yes No 1. Date of change in ownership Recorded Yes No Ownership in name of claimant? Date of completion of new construction Recorded Yes No 2. Date of completion of new construction Explain what was constructed If only a portion of the property is put to an exempt use describe exempt and nonexempt portions in detail If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail 4. Notice: date mailed If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail Not mailed 5. Date claim for exemption from Supplemental Assessment was filed with Assessor In Not mailed 6. Date first installment of supplemental tax bill becomes (became) delinquent Image: Complete address including zip code 7. A claim for veterans' organization exemption on this property: No Image: Complete address including zip code 8. Was not filed last year Yes No 2. Denial Image: Complete address including zip code 9. Reason for denial (if partial denial, identify specific area to be denied) Image: Complete address including zip code Image: Complete address including zi	D.	Ownership of real property (as of applicable lien date) is	s recorded in exa	ct name of claimant	🗌 Yes 🗌 No	
1. Date of change in ownership	_			Did owner file an exemption	on claim? 🗌 Yes 🗌 No	
 Date of completion of new construction Explain what was constructed Date put to exempt use If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail Notice: date mailed Date claim for exemption from Supplemental Assessment was filed with Assessor Date first installment of supplemental tax bill becomes (became) delinquent F. A claim for veterans' organization exemption on this property: was filed last year Yes No was not filed last year, but claimed on another property located at	E.	1. Date of change in ownership		Re	ecorded 🗌 Yes 🗌 No	
 3. Date put to exempt use If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail 4. Notice: date mailed Not mailed 5. Date claim for exemption from Supplemental Assessment was filed with Assessor 6. Date first installment of supplemental tax bill becomes (became) delinquent F. A claim for veterans' organization exemption on this property: was filed last year Yes No in was filed last year, but claimed on another property located at		2. Date of completion of new construction				
 4. Notice: date mailed Interview of the property is the property in the property is the property in the property is the prope				If only a portion	n of the property is put to an	
 5. Date claim for exemption from Supplemental Assessment was filed with Assessor		exempt use, describe exempt and nonexempt portions	in detail			
 6. Date first installment of supplemental tax bill becomes (became) delinquent						
F. A claim for veterans' organization exemption on this property: 1. was filed last year Yes No 2. is new this year Yes No 3. was not filed last year, but claimed on another property located at						
1. was filed last year Yes No No 3. was not filed last year, but claimed on another property located at	F					
3. was not filed last year, but claimed on another property located at	1.			No		
G. Recommendation: 1. Approval (all) 2. Denial (part) (all) (all) (all) (all) (all) (all) (all) (all) (beta denial, identify specific area to be denied) Date Inspection for, Assessore						
Reason for denial (if partial denial, identify specific area to be denied) Date, Assesso	-		-	(give complete addres	s including zip code)	
Date, Assesso	G.					
Date, Assessor		Reason for denial (if partial denial, identify specific area to				
·		Date Insp				

