| E-269-FIR REV. 02 (0 VETERANS' (| 308-18000109-1 ³³⁻⁰⁸⁾ DRGANIZATION EXEMPTION FIELD INSPECTION REPO | | La 22 Su Ph | ck Ceaglio assen County Asse 0 S Lassen Street sanville, CA 96130-4324 one: (530) 251-8241 p://www.lassencounty.or | Ļ |
|-------------------------------------|--|--|---------------------------|---|----------------------|
| SUPPLEME | ASSESSMENT NTAL ASSESSMENT Property No | Year: | | p.//www.iassencounty.or | g/uep/assess0/assess |
| Name of organi | zation | | | | |
| Address of this | property | | (street city zin code) | | |
| Owner only | Operator only Ow | ner-Operator Date of I | ast inspection of proper | rty | |
| If claimant is ow | ner, name of operator is | | | | |
| If claimant is ope | erator, name of owner is | | | | |
| A. Claimant is (check only | primarily: one) 1. charitable | 2. other <i>(explain)</i> | | | |
| B. Use of pro | | | | | |
| 1. The prin | nary activity the property is | used for is: (check only on | e) | | _ |
| ☐ b. c ☐ c. e ☐ d. f | administration commercial educational arming other (<i>explain</i>) | e. fraternal and lodge f. fund raising g. hospital h. housing | meetings | i. medical (not hos j. recreational k. rehabilitation l. informational | pital) |
| 2. Other a | ctivities the property is used | d for are: a. List letters us | ed in B1 | | |
| | | | | | |
| b. vaca | art (write in all or part where nt or unused | c. in excess of | that reasonably necess | | d. used to |
| - | ersonnel whose presence is | | ry | | |
| 1. In your o | on of property for benefit oppinion are services and experter is yes, explain: | enses excessive? | | | 🗌 Yes 🗌 No |
| 2. In your | ppinion do oper <mark>ations en</mark> han er is yes , expla <mark>in</mark> : | ce anyone's private gain? | | | Yes No |
| 3. In your of | opinion is the claimant's properties of the properties of the second secon | bosed new capital investme | ent, if any, necessary? | | 🗌 Yes 🗌 No |
| | of real property (as of appl no, explain: | icable lien date) is recorde | ed in exact name of clair | mant | 🗌 Yes 🗌 No |
| | | | Did owner file | an exemption claim? | 🗌 Yes 🗌 No |
| | ital Assessment (in claiman change in ownership | | | Recorded | 🗌 Yes 🗌 No |
| | hip in name of claimant? — | | | | |
| | completion of new construct | | | | |
| | what was constructed t to exempt use | | If o | only a portion of the pr | operty is put to an |
| - | use, describe exempt and ne | | | | |
| | date mailed | | | | |
| | im for exemption from Supp | | | | |
| | t installment of supplementa veterans' organization exe | | | | |
| | d last year | | | | |
| | filed last year, but claimed o | | | | |
| | | | | | |
| | idation: 1. Approval | () | | | (all) |
| 1100 | ucinai (il partial ucilial, idefil | ny specific area to be defile | | | |
| Date | | Inspection for | r | | |
| | | | / | | |

