269-FIR-R02-0308-33000342-1 -269-FIR REV. 02 (03-08) VETERANS' ORGANIZATION EXEMPT ASSESSOR'S FIELD INSPECTION REPO		Peter Aldana Assessor-County C County of Riverside PO Box 751 Riverside, CA 92502-0751 Phone: (951) 955-6200	
REGULAR ASSESSMENT SUPPLEMENTAL ASSESSMENT Information for Property No	Voor	https://www.asrclkrec.com	n/
Name of organization			
Address of <i>this</i> property Owner only Operator only Ov	(stree	t, city, zip code)	
If claimant is operator, name of owner is			
A. Claimant is primarily: (check only one) 1. charitable	2. other <i>(explain)</i>		
B. Use of property			
1. The primary activity the property is			_
 a. administration b. commercial c. educational d. farming m. other (<i>explain</i>) 	 e. fraternal and lodge meetin f. fund raising g. hospital h. housing 	ngs i. medical (not hos j. recreational k. rehabilitation l. informational	spital)
2. Other activities the property is use	ed for are: a. List letters used in B	1	
			_
3. All or part (write in all or part wher			_
b. vacant or unused		asonably necessary	d. used to
house personnel whose presence i			
 C. Operation of property for benefit 1. In your opinion are services and ex 	penses excessive?		Yes 🗆 N
If answer is yes , explain: 2. In your opinion do operations enha			Yes 🗆 N
If answer is yes , explain:	nce anyone's private gain?		
 In your opinion is the claimant's pro If answer is no, explain: 	pposed new capital investment, if a	ny, necessary?	🗌 Yes 🗌 N
D. Ownership of real property (as of ap If answer is no, explain:	olicable lien date) is recorded in ex	kact name of claimant	🗌 Yes 🗌 N
		_ Did owner file an exemption claim?	Yes 🗆 N
E. Supplemental Assessment (in claima	int's name):		
 Date of change in ownership 		Recorded	🗌 Yes 🗌 N
Ownership in name of claimant?			
2. Date of completion of new construct			
Explain what was constructed —		If only a portion of the p	reportu io put to o
3. Date put to exempt use			
4. Notice: date mailed			
		th Assessor	
6. Date first installment of supplement			
F. A claim for veterans' organization ex		·	
1. was filed last year 🗌 Yes 🗌 N		🗌 No	
3. was not filed last year, but claimed			
G. Recommendation: 1. Approval	(all)	∠. Deniai (part)	(all)
Reason for denial (if partial denial, ider			
_			
Date			,7,00000

