EF-269-FIR-R02-0308-33000200-1 BOE-269-FIR REV. 02 (03-08)

REGULAR ASSESSMENT

## VETERANS' ORGANIZATION EXEMPTION ASSESSOR'S FIELD INSPECTION REPORT



## Peter Aldana Assessor-County Clerk-Recorder

County of Riverside PO Box 751 Riverside, CA 92502-0751 Phone: (951) 955-6200 https://www.asrclkrec.com/

SUPPLEMENTAL ASSES	SMENT Year:		·	
	1 ear.			
Address of <i>this</i> property				
Owner only Operator	or only Owner-Operator	(street, city, zip co	ode) of property	
If claimant is owner, name of				
If claimant is operator, name of	•			
A. Claimant is primarily:				
	charitable $\Box$ 2. other (explain	n)		
B. Use of property				
1. The <b>primary activity</b>	the property is used for is: (che	eck only one)		_
□ a. administration □ b. commercial □ c. educational □ d. farming □ m. other (explain	f. fund rais g. hospital h. housing	5/	i. medical (not hosp j. recreational k. rehabilitation informational	1
2. Other activities the	property is used for are: a. Lis	t letters used in B1		
<ul><li>b. Other(explain)</li><li>3. All or part (write in a</li></ul>	all or part where applicable) of the	ne property is: a. leased	pr rented	
<ul> <li>b. vacant or unused house personnel who</li> </ul>	c. in ose presence is not institutional	excess of that reasonably by necessary	necessary	d. used to
	rty for benefit of persons ervices and expenses excessive	e?		☐ Yes ☐ No
If answer is <b>yes</b> , exp				
• • • • • • • • • • • • • • • • • • • •	perations enhance anyone's priv	vate gain?		Yes 🗌 No
If answer is <b>yes</b> , exp	lain:	al investment if any paces	pean/2	☐ Yes ☐ No
If answer is <b>no</b> , explain		ar investment, it any, neces	ssary:	
D. Ownership of real prop	erty (as of applicable lien date	e) is reco <mark>rded in exact</mark> name	e of claimant	☐ Yes ☐ No
If answer is <b>no</b> , explain:				
Cumplemental Assessm	eent (in claimant's name):	Did ow	vner file an exemption claim?	☐ Yes ☐ No
<ul><li>E. Supplemental Assessm</li><li>1. Date of change in ov</li></ul>	vnership		Recorded	☐ Yes ☐ No
Ownership in name of 2. Date of completion of	f new construction		- /	
Explain what was co 3. Date put to exempt u	nstructed		If only a portion of the pro	operty is put to an
· ·	e exempt and nonexempt portio			
4. Notice: date mailed				
	otion from Supplemental Assess of supplemental tax bill become			
	rganization exemption on this			
	Yes No 2. is new thi	· · · ·		
<ol><li>was not filed last yea</li></ol>	r, but claimed on another prope	erty located at		
	Approval(all)			(all)
Reason for denial (if par	tial denial, identify specific area	•		
Date	In:	spection for		, Assessor
		By		Designee