F-269-FIR-R02-0308-52000134-1 IOE-269-FIR REV. 02 (03-08) VETERANS' ORGANIZATION EXEMPT ASSESSOR'S FIELD INSPECTION REPORT INSPECTION REPORT SUPPLEMENTAL ASSESSMENT Information for Property No. Name of organization Address of this property Owner only Operator only	ORT Year:	et. city. zip code)	
If claimant is owner, name of operator is			
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A. Claimant is primarily:			
 B. Use of property 1. The primary activity the property is a. administration b. commercial c. educational d. farming m. other (<i>explain</i>) 2. Other activities the property is use b. Other(<i>explain</i>) 	e. fraternal and lodge meeti f. fund raising g. hospital h. housing ed for are: a. List letters used in E	j. recreational k. rehabilitation l. informational	
house personnel whose presence i C. Operation of property for benefit 1. In your opinion are services and ex	c. in excess of that re is not institutionally necessary of persons spenses excessive? nce anyone's private gain?	asonably necessary	d. used to Yes No Yes No Yes No
D. Ownership of real property (as of app If answer is no, explain:	plic <mark>able lien date</mark>) is reco <mark>rd</mark> ed in e		
 E. Supplemental Assessment (in claima 1. Date of change in ownership Ownership in name of claimant? 2. Date of completion of new construct 	ction	Did owner file an exemption claim?	☐ Yes ☐ No ☐ Yes ☐ No
 Explain what was constructed 3. Date put to exempt use exempt use, describe exempt and r 4. Notice: date mailed 5. Date claim for exemption from Supplementation 	nonexempt portions in detail	ith Assessor	Dot mailed
 6. Date first installment of supplement F. A claim for veterans' organization ex 1. was filed last year Yes No 3. was not filed last year, but claimed 	tal tax bill becomes (became) delir cemption on <i>this</i> property: o 2. is new this year Yes	nquent	
		2 Donial	o code)
G. Recommendation: 1. Approval Reason for denial <i>(if partial denial, iden</i>		(part)	(all)
Date	Inspection for		, Assesso

Kenneth L. Brown

