EF-269-FIR-R02-0308-57000286-1 BOE-269-FIR REV. 02 (03-08)

REGULAR ASSESSMENT

VETERANS' ORGANIZATION EXEMPTION ASSESSOR'S FIELD INSPECTION REPORT



YOLO COUNTY COUNTY ASSESSOR

625 Court St, Rm. 104 Woodland, CA 95695 Woodland/Davis (530) 666-8135 West Sacramento (916) 375-6496 Fax (530) 666-8213 assessor@yolocounty.org

	JPPLEMENTAL ASSESSMENT		assessor@yolocounty.org		
	· · ·	Year:			
Name	of organization				
Addre	ss of <i>this</i> property	(str	eet, city, zip code)		
☐ Ow	ner only \square Operator only \square	Owner-Operator Date of last in	spection of property		
If claim	nant is owner, name of operator is				
If claim	nant is operator, name of owner is				
	aimant is primari <u>ly:</u>				
		☐ 2. other (explain)			
	Use of property				
1.	1. The primary activity the property is used for is: <i>(check only one)</i>				
	a. administration b. commercial c. educational d. farming m. other (explain)	e. fraternal and lodge meet f. fund raising g. hospital h. housing	j. recreational k. rehabilitation l. informational	<u> </u>	
2.			B1		
2		core applicable) of the property is:	a. leased or rented		
3.		c. in excess of that re		d. used to	
	house personnel whose present	ce is not institutionally necessary	educations, inconsisting	d. deed to	
C. 1.	Operation of property for bene In your opinion are services and			☐ Yes ☐ No	
_	If answer is yes , explain:				
2.	In your opinion do operations en			Yes No	
3.	If answer is yes , explain: In your opinion is the claimant's If answer is no , explain:	proposed new capital investment, if	any, necessary?	☐ Yes ☐ No	
D. O v	D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant Yes				
	answer is no , explain:				
_	<u> </u>		Did owner file an exemption claim?	☐ Yes ☐ No	
	pplemental Assessment (in clai Date of change in ownership		Recorded	☐ Yes ☐ No	
0	Ownership in name of claimant?	w. ratio	_		
۷.	Date of completion of new const				
3.	Explain what was constructed — Date put to exempt use		If only a portion of the p	roperty is put to an	
٠.					
4.					
5.	Date claim for exemption from S	upplemental Assessment was filed v	with Assessor		
			inquent		
	A claim for veterans' organization exemption on this property:				
		No 2. is new this year \square Yes			
3.	was not filed last year, but claime	ed on another property located at $_$	(give complete address including z	ip code)	
			2. Denial		
Reason for denial (if partial denial, identify specific area to be denied)					
Da	te				
		-			

