house personnel whose presence is not institutionally necessary         C. Operation of property for benefit of persons         1. In your opinion are services and expenses excessive?       Yes         If answer is yes, explain:       Yes         2. In your opinion do operations enhance anyone's private gain?       Yes         If answer is yes, explain:       Yes         3. In your opinion is the claimant's proposed new capital investment, if any, necessary?       Yes         If answer is no, explain:       Yes         D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant       Yes         If answer is no, explain:       Did owner file an exemption claim?       Yes         Recorded       Yes       Net         If answer is no, explain:       Did owner file an exemption claim?       Yes       Net         If answer is no, explain:       Poid owner file an exemption claim?       Yes       Net         If answer is no, explain:       Poid owner file an exemption claim?       Yes       Net         If answer is no explain:       Poid owner file an exemption claim?       Yes       Net         If answer is no, explain:       Poid owner file an exemption claim?       Yes       Net         Ownership in name of claimant?       Poid owner file an exemptin claim?       Yes       Net	F-269-FIR-R02-0308-09000111-1 DE-269-FIR REV. 02 (03-08) VETERANS' ORGANIZATION EXEMPTION ASSESSOR'S FIELD INSPECTION REPORT	EL DORADO COUNTY JON DEVILLE, ASSESSOR 360 FAIR LN. PLACERVILLE, CA 95667 TEL. 530-621-5739
Address of this property	SUPPLEMENTAL ASSESSMENT	
Address of this property	Name of organization	
□ Owner only       □ Owner Operator only       □ Owner-Operator         If claimant is operator, name of owner is	Address of <i>this</i> property	
If claimant is owner, name of owner is         If claimant is operator, name of owner is         A. Claimant is primarily:         (check only one)       1. the intratible         B. Use of property         1. The primary activity the property is used for is: (check only one)         a. administration       a if fund raising         b. commercial       g, hospital         c. educational       g, hospital         d. farming       h. h. housing         d. farming       c. h. inclusing         d. farming       c. in excess of the trassonably necessary         d. farming varies of presence is not institutionably necessary       d. used to house personnel whose thresence is on institutionably necessary         b. vacant or unused       c. in excess of that reasonably necessary       d. used to house personnel whose thresence is not institutionably necessary         1. In your opinion are services and expenses exclossive?       yes not if answer is yes, explain:         1. In your opinion is the claimant's proposed new capital investment, if any, necessary?       yes not if answer is no, explain:         D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant       yes not if answer is no, explain: </td <td>Owner only Operator only Owner-Operator Date of last in:</td> <td>spection of property</td>	Owner only Operator only Owner-Operator Date of last in:	spection of property
If claimant is operator, name of owner is         A. Claimant is primarily: (check only one)       1. charitable       2. other (explain)         B. Use of property         1. The primary activity the property is used for is: (check only one)       a. adminisfration       eif rate/mal and lodge meetings       b. medical (not hospital)         b. commercial       g. hospital       g. hospital       b. medical (not hospital)         c. educational       g. hospital       h. frout rational       f. frond rational         c. educational       g. hospital       h. frout rational       f. frond rational         d. farming       h. housing       t. informat/oral       d. informat/oral         d. farming       on the (explain)       s. List letters used in B1       b. Other(explain)         b. Other(explain)       c. neccess of that reasonably necessary       d. used to house personel whose presence is not institutionally necessary         C. Operation of property for bondif of properoy is       in your opinion are services and expenses excessive?       Yes <n answer="" explain:<="" if="" is="" nu="" td="" yes,="">         In your opinion are services and expenses excessive?       Yes<n answer="" explain:<="" if="" is="" no,="" nu="" td="">       Yes<n answer="" explain:<="" if="" is="" no,="" nu="" td="">         D. Ownership of real property (as of applicable lien date) is recorded in exert name of claimant       Yes<n answer="" explain:<="" if="" is="" no,="" nu="" td="">         D. Ownership of neal property (as of ap</n></n></n></n>		
A Claimant is primarily: (check only one) 1. charitable 2. other (explain) 4. Use of property 1. The primary activity the property is used for is: (check only one) a. administration b. commercial f. f. fund raising	If claimant is operator, name of owner is	
1. The primary activity the property is used for is: (check only one)	A. Claimant is primarily:	
a. administration       b. fratemal and lodge meetings       b. medical (not hespital)         b. commercial       c haspital       c. haspital         c. ducational       c haspital       c. haspital         c. ducational       n. housing       l. h. recreational         c. ducational       n. housing       l. h. recreational         d. farming       n. h. housing       l. informational         d. farming       n. h. housing       l. informational         d. farming       n. h. housing       l. informational         b. Vacant or unused       of the property is: a. leased or rented       d. used to house personnel whose presence is not institutionally necessary         C. Operation of property for benefit of persons       l. in your opinion are services and expenses excessive?       l yes         1. In your opinion is the daimant's proposed new capital investment. If any, necessary?       l yes       Nu         if answer is yee, explain:       lianswer is one, explain:       lid owner file an exemption claim?       l yes       Nu         J. Dour opinion is the daimant's name):       lid owner file an exemption claim?       l yes       Nu         If answer is yee, explain:       lid owner file an exemption claim?       l yes       Nu         J. Date of change in ownership       manumet?       lid owner file an exemption clai	B. Use of property	
□       b. commercial       □       f. f. fund raising       □       j. recreational         □       c. educational       □       h. housing       □       k. rehabilitation         □       d. farming       □       h. housing       □       k. rehabilitation         □       d. farming       □       h. housing       □       k. rehabilitation         □       m. other (explain)       □       a. List letters used in B1       □         b. Other activities the property is used for are:       a. List letters used in B1       □       □         b. vacant or unused       □       i. nexcess of that reasonably necessary       □       d. used to house personel whose presence is not institutionally necessary         C. Operation of property for bonefit of persons       □       □       Not mersing       □       Yes       Not ff answer is yes, explain:         2. In your opinion do operations enhance anyone's private gain?       □       Yes       Not ff answer is no, explain:       □       □       Not market is no, explain:         2. In your opinion do the aliaimant's proposed new capital investment, if any, necessary?       □       Yes       Not ff answer is no, explain:         3. In your opinion is the taliaimant's name.       □       □       Ownership in name of claimant'       □       N	1. The primary activity the property is used for is: (check only one)	
b. Other(explain)         3. All or part (write in all or part where applicable) of the property is: a. leased or rented         b. vacant or unused       0. in excess of that reasonably necessary         c. Operation of property for benefit of persons         1. In your opinion are services and expenses excessive?         if answer is yes, explain:         2. In your opinion do operations enhance anyone's private gain?         if answer is yes, explain:         3. In your opinion is the claimant's proposed new capital investment, if any, necessary?         if answer is no, explain:         D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant         if answer is no, explain:         D. Ownership of chall property (as of applicable lien date) is recorded in exact name of claimant         Yes         Nu         D. Ownership of chall property (as of applicable lien date)         Supplemental Assessment (in claimant's name):         1. Date of change in ownership         2. Date of completion of new construction         Explain what was constructed         3. Date put to exempt use         action for exemption for Supplemental Assessment was filed with Assessor         6. Date first installment of supplemental tax bill becomes (became) delinquent         F. Aclaim for veterans' organization exemption on this property:	b. commercial       f. fund raising         c. educational       g. hospital         d. farming       h. housing	j. recreational k. rehabilitation
<ul> <li>3. All or part (write in all or part where applicable) of the property is: a leased or rented</li></ul>		31
b. vacant or unused       c. in excess of that reasonably necessary       d. used to house personnel whose presence is not institutionally necessary         C. Operation of property for benefit of persons       In your opinion are services and expenses excessive?       Yes         If answer is yes, explain:       Yes       Yes         2. In your opinion are services and expenses excessive?       Yes       Not         If answer is yes, explain:       Yes       Not         3. In your opinion is the daimant's proposed new capital investment, if any, necessary?       Yes       Not         If answer is no, explain:       Did owner file an exemption claim?       Yes       Not         If answer is no, explain:       Did owner file an exemption claim?       Yes       Not         If answer is no, explain:       Did owner file an exemption claim?       Yes       Not         E. Supplemental Assessment (in claimant's name):       Did owner file an exemption claim?       Yes       Not         1. Date of change in ownership       Recorded       Yes       Not         2. Date of completion of new construction       If only a portion of the property is put to an exempt use exempt use (ascribe exempt and nonexempt portions in detail       Not maile         3. Date put to exempt and nonexempt portions in detail	b. Other( <i>explain</i> )	
1. In your opinion are services and expenses excessive?       Image: system of the system of the services and expenses excessive?       Image: system of the system of the services and expenses excessive?       Image: system of the system	b. vacant or unused c. in excess of that re	
2. In your opinion do operations enhance anyone's private gain?       Image: septial in the claimant's proposed new capital investment, if any, necessary?       Image: septial interpretation is the claimant's proposed new capital investment, if any, necessary?       Image: septial interpretation is no, explain:         D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant       Image: septial interpretation is no, explain:       Image: septial is no, explain:         D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant       Image: septial is no, explain:       Image: septial is no, explain:         E. Supplemental Assessment (in claimant's name):       Image: septial is no wnership in name of claimant?       Image: septial is no wnership in name of claimant?       Image: septial is no wnership in name of claimant?         2. Date of completion of new construction is exact name of property use is put to exampt use is not exampt use is not complete in an exempt use is put to exampt use is not complete in on the complete is not complete its installed in the property is put to an exempt use, describe exempt and nonexempt portions in detail       Image: septial is not supplemental as the property:       Image: septial is not supplemental as the property:       Image: septial is not apple: septial is property:         1. Was filed last year       Yes       No       No       Image: septial is not property located at is not detail is property:       Image: septial is not detail is not detail is property:       Image: septial is not detail is not detail is property:       Image: septial is not detai	1. In your opinion are services and expenses excessive?	Yes No
3. In your opinion is the claimant's proposed new capital investment, if any, necessary?       If answer is no, explain:         D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant       Yes         If answer is no, explain:	2. In your opinion do operations enhance anyone's private gain?	Yes No
B: Onterstrip of real placing decompleted in the decide in externation of dathetic         If answer is no, explain:	3. In your opinion is the claimant's proposed new capital investment, if a	any, necessary?
E.       Supplemental Assessment (in claimant's name):       Recorded       Yes       Note         1.       Date of change in ownership       Recorded       Yes       Note         2.       Date of completion of new construction       Explain what was constructed       If only a portion of the property is put to an exempt use         3.       Date put to exempt use       If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail       If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail         4.       Notice: date mailed       If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail         4.       Notice: date mailed       If only a portion of the property is put to an exemption from Supplemental Assessment was filed with Assessor         6.       Date first installment of supplemental tax bill becomes (became) delinquent         F.       A claim for veterans' organization exemption on this property:         1.       was not filed last year       Yes         3.       was not filed last year, but claimed on another property located at       (give complete address including zip code)         G.       Recommendation:       1. Approval       2. Denial       (part)       (all)         Date       Inspection for		
1. Date of change in ownership       Recorded       Yes       No         2. Date of completion of new construction       Explain what was constructed       If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail       If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail         4. Notice: date mailed       If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail         5. Date claim for exemption from Supplemental Assessment was filed with Assessor       Not mailed         6. Date first installment of supplemental tax bill becomes (became) delinquent       F.         7. A claim for veterans' organization exemption on this property:       No         1. was filed last year       Yes       No         2. was not filed last year, but claimed on another property located at       (give complete address including zip code)         6. Recommendation:       1. Approval       2. Denial       (part)         (all)       Reason for denial (if partial denial, identify specific area to be denied)	E Supplemental Accessment (in claimant's name):	Did owner file an exemption claim? └─ Yes └─ No
<ul> <li>2. Date of completion of new construction Explain what was constructed</li> <li>3. Date put to exempt use If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail Notice: date mailed Not mailed</li> <li>5. Date claim for exemption from Supplemental Assessment was filed with Assessor Not mailed</li> <li>5. Date claim for exemption from Supplemental Assessment was filed with Assessor Not mailed</li> <li>6. Date first installment of supplemental tax bill becomes (became) delinquent Reason for denial (if partial denial, identify specific area to be denied) (give complete address including zip code)</li> <li>6. Recommendation: 1. Approval (all)</li> <li>C. Date Inspection for Assesses</li> </ul>	1. Date of change in ownership	Recorded
<ul> <li>3. Date put to exempt use If only a portion of the property is put to ar exempt use, describe exempt and nonexempt portions in detail</li> <li>4. Notice: date mailed Not mailed</li> <li>5. Date claim for exemption from Supplemental Assessment was filed with Assessor</li> <li>6. Date first installment of supplemental tax bill becomes (became) delinquent</li> <li>7. A claim for veterans' organization exemption on this property: <ol> <li>was filed last year Yes</li> <li>No</li> <li>is new this year Yes</li> <li>No</li> </ol> </li> <li>6. Recommendation: 1. Approval</li></ul>		
exempt use, describe exempt and nonexempt portions in detail   4. Notice: date mailed   5. Date claim for exemption from Supplemental Assessment was filed with Assessor   6. Date first installment of supplemental tax bill becomes (became) delinquent   F. A claim for veterans' organization exemption on this property:   1. was filed last year   Yes   No   3. was not filed last year, but claimed on another property located at   (give complete address including zip code)   G. Recommendation: 1. Approval    (all)   Reason for denial (if partial denial, identify specific area to be denied)		
<ul> <li>4. Notice: date mailed Not mailed</li> <li>5. Date claim for exemption from Supplemental Assessment was filed with Assessor</li> <li>6. Date first installment of supplemental tax bill becomes (became) delinquent</li> <li>F. A claim for veterans' organization exemption on this property: <ol> <li>was filed last year Yes</li> <li>No</li> <li>in was filed last year, but claimed on another property located at</li></ol></li></ul>		
<ol> <li>Date first installment of supplemental tax bill becomes (became) delinquent</li></ol>	4. Notice: date mailed	Not maile
F. A claim for veterans' organization exemption on this property:         1. was filed last year       Yes         No       2. is new this year         Yes       No         3. was not filed last year, but claimed on another property located at		
1. was filed last year       Yes       No       2. is new this year       Yes       No         3. was not filed last year, but claimed on another property located at		
3. was not filed last year, but claimed on another property located at		
G. Recommendation: 1. Approval 2. Denial (all) (all)(all)(all) (all)(all) (all) (all)(all) (all)(al		
Reason for denial (if partial denial, identify specific area to be denied)   Date	3. was not filed last year, but claimed on another property located at	(give complete address including zip code)
Date, Assess		
Date, Assess		
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