E-269 VE	-FIR-R02-0308-17000384-1 FIR REV. 02 (03-08) FERANS' ORGANIZATION EXEMPTION SESSOR'S FIELD INSPECTION REPORT		Douglas W. Wacker County Assessor-Re Lake County Courthouse 255 North Forbes Street Lakeport, CA 95453 Assessor's Office Phone: 7	
	REGULAR ASSESSMENT SUPPLEMENTAL ASSESSMENT		Recorder's Office Phone: 7 Fax: 707-263-3703	
	mation for Property No.			
Nar	ne of organization			
Add	Iress of <i>this</i> property	(stree	et, city, zip code)	
	Owner only 🗌 Operator only 🗌 Owner-Ope	erator Date of last ins	spection of property	
If cl	aimant is owner, name of operator is			
lf cl	aimant is operator, name of owner is			
A.	Claimant is primarily: (check only one)	r (explain)		
В.	Use of property			
	1. The primary activity the property is used for	r is: (check only one)		
	b. commercial f. c. educational g.	fraternal and lodge meeti fund raising hospital housing	ngs i. medical (not hos j. recreational k. rehabilitation l. informational	pital)
	2. Other activities the property is used for are	e: a. List letters used in E	31	
	 All or part (write in all or part where application of the second se 			
	b. vacant or unused		asonably necessary	d. used to
	house personnel whose presence is not insi C. Operation of property for benefit of perso 1. In your opinion are services and expenses of	ons		Yes 🗆 N
	If answer is yes , explain:			
	2. In your opinion do operations enhance anyc	ne's private gain?		Yes 🗌 N
	If answer is yes , explain: 3. In your opinion is the claimant's proposed n If answer is no , explain:	ew capital investment, if a	iny, necessary?	Yes N
	Ownership of real property (as of applicable I If answer is no , explain:	ien date) is recorded in e	xact name of claimant	Yes N
			Did owner file an exemption claim?	🗌 Yes 🗌 N
E.	Supplemental Assessment (in claimant's n <mark>ar</mark> n	ie):		
	 Date of change in ownership 		Recorded	🗌 Yes 🗌 N
	Ownership in name of claimant?			
	2. Date of completion of new construction			
	Explain what was constructed		If only a portion of the pr	oporty is put to a
	exempt use, describe exempt and nonexem			
	4. Notice: date mailed			
	5. Date claim for exemption from Supplementa			
	6. Date first installment of supplemental tax bil			
	A claim for veterans' organization exemption		·	
	1. was filed last year 🗌 Yes 🗌 No 🛛 2. is	s new this year 🗌 Yes	🗌 No	
	3. was not filed last year, but claimed on anoth			
	Recommendation: 1. Approval			
	Reason for denial <i>(if partial denial, identify spec</i>	;ific area to be denied)		
	Date	Inspection for		, Asses
		By		Desig

