F-269-FIR-R02-0308-39000315-1 OE-269-FIR REV. 02 (03-08) VETERANS' ORGANIZATION EXEMPTIO ASSESSOR'S FIELD INSPECTION REPOR REGULAR ASSESSMENT SUPPLEMENTAL ASSESSMENT Information for Property No Name of organization	PT		County Clerk uite 230 68-2647
Address of <i>this</i> property	(street, cit	y, zip code)	
Owner only Operator only Owner Owne	er-Operator Date of last inspec	tion of property	
If claimant is operator, name of owner is			
A. Claimant is primarily: (check only one) 1. charitable 2	2. other (explain)		
B. Use of property			
<ol> <li>The primary activity the property is u</li> <li>a. administration</li> <li>b. commercial</li> <li>c. educational</li> <li>d. farming</li> <li>m. other (<i>explain</i>)</li> </ol>	<ul> <li>e. fraternal and lodge meetings</li> <li>f. fund raising</li> <li>g. hospital</li> <li>h. housing</li> </ul>	<ul> <li>i. medical (not hosp</li> <li>j. recreational</li> <li>k. rehabilitation</li> <li>l. informational</li> </ul>	pital)
2. Other activities the property is used	for are: a. List letters used in B1 _		
<ul> <li>b. Other(explain)</li> <li>3. All or part (write in all or part where a b. vacant or unused house personnel whose presence is r</li> <li>c. Operation of property for benefit of 1. In your opinion are services and expendent of the personnel whose presence is not provide the personnel whose presence is not personnel whose per</li></ul>	c. in excess of that reason not institutionally necessary f persons	ased or rented	d. used to
3. In your opinion is the claimant's propo	e an <mark>yone's</mark> private gain?	necessary?	Yes No
If answer is <b>no</b> , explain: D. <b>Ownership of real property</b> (as of applied If answer is <b>no</b> , explain:	cable lien date) is recorded in exact	name of claimant	🗌 Yes 🗌 No
		Did owner file an exemption claim?	🗌 Yes 🗌 No
<ul> <li>E. Supplemental Assessment (in claimant<sup>*</sup></li> <li>1. Date of change in ownership</li> <li>Ownership in name of claimant?</li> </ul>	$\mathbf{H}\mathbf{C}$	Recorded	🗌 Yes 🗌 No
<ol> <li>Date of completion of new construction</li> <li>Explain what was constructed ———</li> <li>Date put to exempt use</li> </ol>		If only a portion of the pro-	operty is put to an
exempt use, describe exempt and no		<b>,</b> 1	, , ,
	emental Assessment was filed with A	Assessor	
F. A claim for veterans' organization exer			
1. was filed last year 🗌 Yes 🗌 No	2. is new this year $\Box$ Yes $\Box$	No	
3. was not filed last year, but claimed on	another property located at	(give complete address including zip	
G. Recommendation: 1. Approval	2	. Denial(part)	(all)
Reason for denial (if partial denial, identif	y specific area to be denied)		
 Date			

