EF-269-FIR-R02-0308-43000085-1 BOE-269-FIR REV. 02 (03-08)

VETERANS' ORGANIZATION EXEMPTION ASSESSOR'S FIELD INSPECTION REPORT



Greg Monteverde Acting Assessor

By ______, Designee

Exemption Division 130 W Tasman Drive San Jose, CA 95134 Ph: (408) 299-6460 FAX: (408) 271-8812 exemptions@asr.sccgov.org

	REGULAR ASSESSMENT		exemptions@asr.sccgov.o	rg
	SUPPLEMENTAL ASSESSMENT	Year:	www.sccassessor.org	
	e of organizationess of <i>this</i> property			
		(str	reet, city, zip code)	
			nspection of property	
	mant is owner, name of operator is			
	mant is operator, name of owner is			
	Claimant is primarily: check only one) ☐ 1. charitable	2. other (explain)		
В. し	Jse of property			
1	. The primary activity the property	y is used for is: (check only one)		
	a. administration b. commercial c. educational d. farming m. other (explain)	e. fraternal and lodge mee f. fund raising g. hospital h. housing	tings i. medical (not hos j. recreational k. rehabilitation l. informational	sp <mark>i</mark> tal)
2	Other activities the property is	used for are: a. List letters used in	B1	
	b. Other(explain)			
3	3. All or part (write in all or part wh	ere applicable) of the property is:	a. leased or rented	
		c. in excess of that r	easonably necessary	d. used to
		e is not institutionally necessary		
	Operation of property for beneIn your opinion are services and	expenses excessive?		☐ Yes ☐ No
0	If answer is yes , explain:			
2	. In your opinion do operations en	nance anyone's private gain?		■ L Yes L No
3	If answer is yes , explain:	proposed new capital investment, if	any necessary?	☐ Yes ☐ No
J	If answer is no , explain:	proposed new capital investment, i	arry, riccessary:	
D C		applicable lien date) is recorded in	exact name of claimant	☐ Yes ☐ No
	answer is no , explain:		exact fame of claimant	
	anower to no, explain.		Did owner file an exemption claim?	☐ Yes ☐ No
E. S	supplemental Assessment (in clair	mant's n <mark>ar</mark> ne):		
1	. Date of change in ownership		Recorded	☐ Yes ☐ No
	Ownership in name of claimant?			
2	. Date of completion of new const	ruction		
	Explain what was constructed —			
3			If only a portion of the pr	roperty is put to an
	•	d nonexempt portions in detail		
-	. Notice: date mailed		with A and a second	
			with Assessorinquenti	
	claim for veterans' organization		iliquerit	
	_	No 2. is new this year \square Yes	□No	
			(give complete address including zi	p code)
G. R	Recommendation: 1. Approval	(all)	_ 2. Denial	(all)
				, ,
Reason for denial (if partial denial, identify specific area to be denied)				
	Pate	Inspection for		, Assessor
ᆫ	, u.o	1130000011101		,

