EF-269-FIR-R02-0308-46000090-1 BOE-269-FIR REV. 02 (03-08)

VETERANS' ORGANIZATION EXEMPTION ASSESSOR'S FIELD INSPECTION REPORT



Ms. Laura Marshall Sierra County Assessor

100 Courthouse SQ Downieville, CA 95936-8 Phone: (530) 289-3283

	REGULAR ASSESSMENT SUPPLEMENTAL ASSESSMENT			
Info	formation for Property No	Year:		
Na	ame of organization			
Ad	ddress of <i>this</i> property	(stre	et city zin code)	
Ш	☐ Owner only ☐ Operator only ☐ Own	ner-Operator Date of last ins	spection of property	
	claimant is operator, name of owner is			
	Claimant is primarily: (check only one) 1. charitable	2. other <i>(explain)</i>		
B.	Use of property			
	1. The primary activity the property is u			
	□ a. administration □ b. commercial □ c. educational □ d. farming □ m. other (explain)	 e. fraternal and lodge meeti f. fund raising g. hospital h. housing 	ings i. medical (no j. recreationa k. rehabilitation	on
	2. Other activities the property is used	for are: a. List letters used in E	31	
	 All or part (write in all or part where vacant or unused house personnel whose presence is 	c. in excess of that re		d. used to
	Operation of property for benefit o In your opinion are services and expense.	enses excessive?		Yes No
	If answer is yes , explain:	ce anvone's private gain?		☐ Yes ☐ No
	If answer is yes , explain:	se anyone 3 private gain:		☐ 1C3 ☐ 1NO
	3. In your opinion is the claimant's prop If answer is no , explain:	osed new capital investment, if a	any, nece <mark>ss</mark> ary?	☐ Yes ☐ No
D.	Ownership of real property (as of appli	icable liep date) is recorded in e	exact name of claimant	☐ Yes ☐ No
If answer is no , explain:				
			Did owner file an exemption cl	aim?
E.	Supplemental Assessment (in claimant			
	Date of change in ownership		Record	ded ☐ Yes ☐ No
	Ownership in name of claimant? — 2. Date of completion of new construction	on		
	Explain what was constructed ————————————————————————————————————		If only a portion of	the property is put to an
	exempt use, describe exempt and no			
	4. Notice: date mailed			
	5. Date claim for exemption from Suppl			
	6. Date first installment of supplementa		nquent	
F. A claim for veterans' organization exemption on <i>this</i> property:				
	1. was filed last year ☐ Yes ☐ No			
	3. was not filed last year, but claimed or	n another property located at	(give complete address incl	uding zin code)
G.	. Recommendation: 1. Approval		2 Denial	
٠.	Reason for denial (if partial denial, identi	(all)	(part)	(all)
	Date	Inspection for		, Assessor
		Bv		. Designee