| DE-269-I VET | FIR-R02-0308-51000326-1 FIR REV. 02 (03-08) ERANS' ORGANIZATION EXEMPTIO ESSOR'S FIELD INSPECTION REPOR | | Kathy Scriven Sutter County Asses 1160 Civic Center Blvd., Su Yuba City, CA 95993 Phone Number: (530) 822- Fax Number: (530) 822-71 | uite D 7160 |
|-----------------|---|---|--|----------------|
| | REGULAR ASSESSMENT SUPPLEMENTAL ASSESSMENT | Urok | Email: assessor@co.sutter | |
| | mation for Property No | | | |
| Nan | ne of organization | | | |
| Add | ress of <i>this</i> property | (stre | et, city, zip code) | |
| | Owner only Operator only Own | er-Operator Date of last in | spection of property | |
| | | | | |
| | imant is operator, name of owner is | | | |
| | Claimant is primarily: (check only one) | 2. other <i>(explain)</i> | | |
| | Use of property | | | |
| | 1. The primary activity the property is u | ised for is: (check only one) | _ | |
| | a. administration b. commercial c. educational d. farming m. other (explain) | e, fraternal and lodge meet f, fund raising g, hospital h, housing | ings i. medical (not hos j. recreational k. rehabilitation l. informational | pital) |
| : | 2. Other activities the property is used | for are: a. List letters used in I | 31 | |
| | b. Other <i>(explain)</i> | | | |
| | All or part (write in all or part where a b. vacant or unused house personnel whose presence is r | c. in excess of that re | | d. used to |
| | C. Operation of property for benefit of In your opinion are services and expension | f persons enses excessive? | | Yes No |
| 2 | If answer is yes , explain: 2. In your opinion do operations enhanc If answer is yes , explain: | | | Yes 🗌 No |
| 3 | In your opinion is the claimant's propo If answer is no, explain: | osed new capital investment, if a | any, necessary? | □ Yes □ No |
| | Dwnership of real pro<mark>perty</mark> (as of applied f answer is no, explain: | cable lien date) is reco <mark>rd</mark> ed in e | xact name of claimant | 🗌 Yes 🗌 No |
| | | | Did owner file an exemption claim? | 🗌 Yes 🗌 No |
| | Supplemental Assessment (in claimant . Date of change in ownership | | Recorded | 🗌 Yes 🗌 No |
| 2 | Ownership in name of claimant? — 2. Date of completion of new construction | on | | |
| 3 | Explain what was constructed B. Date put to exempt use | | If only a portion of the pr | 1 2 1 |
| _ | Notice: date mailed | | | 🗌 Not maile |
| | Date first installment of supplemental | | | |
| F. / | A claim for veterans' organization exer 1. was filed last year Yes No | mption on <i>thi</i> s property: | | |
| | | | | |
| | was not filed last year, but claimed or Recommendation: 1. Approval | | | |
| | Reason for denial <i>(if partial denial, identif</i> | () | | |
| - r | Date | Inspection for | | |
| | | 1 | | |
| | | = , | | , _ co.gno |

