EF-269-FIR-R02-0308-52000092-1 BOE-269-FIR REV. 02 (03-08)

REGULAR ASSESSMENT

## VETERANS' ORGANIZATION EXEMPTION ASSESSOR'S FIELD INSPECTION REPORT



## Burley Phillips Tehama County Assessor

444 Oak Street - Room B P. O. Box 428 Red Bluff, CA 96080 (530) 527-5931 Fax (530) 529-4019 assessor@tehama.gov

	SUPPLEMENTAL ASSESSMENT	.,	assessor@tehama.gov	hrough Fridou
	rmation for Property No.			nrougn Friday
Na	me of organization			
Ad	dress of <i>this</i> property		(street, city, zip code)	
		Owner-Operator Date of	last inspection of property	
If c	aimant is owner, name of operator is			
If c	aimant is operator, name of owner is			
A.	Claimant is primarily:			
	· · ·	☐ 2. other (explain)		
B.	Use of property			
1. The <b>primary activity</b> the property is used for is: <i>(check only one)</i>				
	□ a. administration □ b. commercial □ c. educational □ d. farming □ m. other (explain)	e. fraternal and lodge f. fund raising g. hospital h. housing	j. recreational k. rehabilitation l. informational	1
	2. Other activities the property is used for are: a. List letters used in B1			
	3. All or part (write in all or part wh	c. in excess of	is: a. leased or rentedthat reasonably necessary	d. used to
	<ul><li>C. Operation of property for beneat</li><li>In your opinion are services and</li></ul>	expenses excessive?		☐ Yes ☐ No
	If answer is <b>yes</b> , explain:			Yes No
	2. In your opinion do operations enhance anyone's private gain?  If answer is <b>yes</b> , explain:			
	<ul><li>In your opinion is the claimant's If answer is no, explain:</li></ul>	proposed new capital investme	ent, if any, necessary?	☐ Yes ☐ No
D.	Ownership of real property (as of	applicable lien date) is recorde	ed in exact name of claimant	☐ Yes ☐ No
	If answer is <b>no</b> , explain:			
			Did owner file an exemption claim?	☐ Yes ☐ No
E.	Supplemental Assessment (in claim 1. Date of change in ownership		Recorded	☐ Yes ☐ No
	Ownership in name of claimant? 2. Date of completion of new const	ruction		
			If only a portion of the p	
	4. Notice: date mailed		61 1 W A	
			filed with Assessor	
_	6. Date first installment of supplemental tax bill becomes (became) delinquent			
1. was filed last year ☐ Yes ☐ No 2. is new this year ☐ Yes ☐ No				
3. was not filed last year, but claimed on another property located at				ip code) .
G.	<b>Recommendation:</b> 1. Approval	(all)	2. Denial	(all)
Reason for denial (if partial denial, identify specific area to be denied)				
	Date	Inspection to	r	
		·	y	

