EF-269-FIR-R02-0308-57000070-1 BOE-269-FIR REV. 02 (03-08)

REGULAR ASSESSMENT

VETERANS' ORGANIZATION EXEMPTION ASSESSOR'S FIELD INSPECTION REPORT



YOLO COUNTY COUNTY ASSESSOR

625 Court St, Rm. 104 Woodland, CA 95695 Woodland/Davis (530) 666-8135 West Sacramento (916) 375-6496 Fax (530) 666-8213 assessor@yolocounty.org

| | JPPLEMENTAL ASSESSMENT | | assessor@yolocounty.org | | |
|--|--|--|--|----------------------|--|
| | · · · | Year: | | | |
| Name | of organization | | | | |
| Addre | ss of <i>this</i> property | (str | eet, city, zip code) | | |
| ☐ Ow | ner only \square Operator only \square | Owner-Operator Date of last in | spection of property | | |
| If claim | nant is owner, name of operator is | | | | |
| If claim | nant is operator, name of owner is | | | | |
| | aimant is primari <u>ly:</u> | | | | |
| | | ☐ 2. other (explain) | | | |
| | Use of property | | | | |
| 1. | 1. The primary activity 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 meet f. fund raising g. hospital h. housing | j. recreational k. rehabilitation l. informational | <u> </u> | |
| 2. | | | B1 | | |
| 2 | | core applicable) of the property is: | a. leased or rented | | |
| 3. | | c. in excess of that re | | d. used to | |
| | house personnel whose present | ce is not institutionally necessary | educations, inconsisting | d. deed to | |
| C. 1. | Operation of property for bene In your opinion are services and | | | ☐ Yes ☐ No | |
| _ | If answer is yes , explain: | | | | |
| 2. | In your opinion do operations en | | | Yes No | |
| 3. | If answer is yes , explain: In your opinion is the claimant's If answer is no , explain: | proposed new capital investment, if | any, necessary? | ☐ Yes ☐ No | |
| D. O v | D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant Yes | | | | |
| | answer is no , explain: | | | | |
| _ | <u> </u> | | Did owner file an exemption claim? | ☐ Yes ☐ No | |
| | pplemental Assessment (in clai Date of change in ownership | | Recorded | ☐ Yes ☐ No | |
| 0 | Ownership in name of claimant? | w. ratio | _ | | |
| ۷. | Date of completion of new const | | | | |
| 3. | Explain what was constructed — Date put to exempt use | | If only a portion of the p | roperty is put to an | |
| ٠. | | | | | |
| 4. | | | | | |
| 5. | Date claim for exemption from S | upplemental Assessment was filed v | with Assessor | | |
| | | | inquent | | |
| | A claim for veterans' organization exemption on this property: | | | | |
| | | No 2. is new this year \square Yes | | | |
| 3. | was not filed last year, but claime | ed on another property located at $_$ | (give complete address including z | ip code) | |
| | | | 2. Denial | | |
| Reason for denial (if partial denial, identify specific area to be denied) | | | | | |
| Da | te | | | | |
| | | - | | | |

