EF-269-FIR-R02-0308-06000185-1 BOE-269-FIR REV. 02 (03-08)

REGULAR ASSESSMENT

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



## **Bob Buckner Colusa County Assessor**

547 Market St., Suite 101 Colusa, CA 95932 (530) 458-0450

SUPPLEMENTAL ASSESSMENT Information for Property No Year:	
Name of organization	
Address of <i>this</i> property	
If claimant is owner, name of operator is	
If claimant is operator, name of owner is	
A. Claimant is primarily:  (check only one)  1. charitable 2. other (explain)	
B. Use of property	
The <b>primary activity</b> the property is used for is: (check only one)	
$\square$ a. administration $\square$ e. fraternal and lodge meetings $\square$ i. medical (not h	nospital)
$\square$ b. commercial $\square$ f. fund raising $\square$ j. recreational	
☐ c. educational ☐ g. hospital ☐ k. rehabilitation	
$\square$ d. farming $\square$ h. housing $\square$ l. informational	
m. other (explain)	
Other activities the property is used for are: a. List letters used in B1	
b. Other(explain)	
3. All or part (write in all or part where applicable) of the property is: a. leased or rented	
b. vacant or unused c. in excess of that reasonably necessary	
house personnel whose presence is not institutionally necessary	
C. Operation of property for benefit of persons	
In your opinion are services and expenses excessive?	☐ Yes ☐ No
If answer is <b>yes</b> , explain:	
2. In your opinion do operations enhance anyone's private gain?	☐ Yes ☐ No
If answer is <b>yes</b> , explain:	☐ Yes ☐ No
If answer is <b>no</b> , explain:	
D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant	☐ Yes ☐ No
If answer is <b>no</b> , explain:	
Did owner file an exemption clair	n? 🗌 Yes 🗌 No
E. Supplemental Assessment (in claimant's name):	
1. Date of change in ownership Recorded	
Ownership in name of claimant?	
Date of completion of new construction	
Explain what was constructed —	
3. Date put to exempt use If only a portion of the	
exempt use, describe exempt and nonexempt portions in detail	
Notice: date mailed      Date claim for exemption from Supplemental Assessment was filed with Assessor	
Date Gain for exemption from Supplemental Assessment was filed with Assessor      Date first installment of supplemental tax bill becomes (became) delinquent	
F. A claim for veterans' organization exemption on <i>this</i> property:	
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	
G. Recommendation: 1. Approval 2. Denial(part)	(all)
Reason for denial (if partial denial, identify specific area to be denied)	
Reason for definal (if partial definal, identity specific area to be defined)	
Date Inspection for	
Ву	

