EF-269-FIR-R02-0308-06000042-1 BOE-269-FIR REV. 02 (03-08)

VETERANS' ORGANIZATION EXEMPTION ASSESSOR'S FIELD INSPECTION REPORT



Bob Buckner Colusa County Assessor

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

	REGULAR ASSESSMENT SUPPLEMENTAL ASSESSMENT		
Info	rmation for Property No.	Year:	
Na	me of organization		
Add	dress of <i>this</i> property	(street, city, zip code)	
Ш	Owner only \square Operator only \square	Owner-Operator Date of last inspection of property	
	aimant is owner, name of operator is		
	aimant is operator, name of owner is		
A.	Claimant is primarily: (check only one) ☐ 1. charitable	2. other (explain)	
B.	B. Use of property		
The primary activity the property is used for is: (check only one)			
	a. administration	\square e. fraternal and lodge meetings \square i. medical (not hospit	tal)
	b. commercial	f. fund raising j. recreational	
	C. educational	g. hospital k. rehabilitation	
	d. farming	☐ h. housing ☐ I. informational	
	2. Other activities the property is	used for are: a. List letters used in B1	
		nere applicable) of the property is: a. leased or rented	
	b. vacant or unused	e is not institutionally necessarye	d. used to
	C. Operation of property for bene		
	1. In your opinion are services and	expenses excessive?	☐ Yes ☐ No
	If answer is yes, explain:In your opinion do operations en	hanca anyona'a privata gain?	☐ Yes ☐ No
		nance anyone's private gain?	□ res □ no
		proposed new capital investment, if any, necessary?	☐ Yes ☐ No
D.	Ownership of real property (as of	applicable lien date) is recorded in exact name of claimant	☐ Yes ☐ No
If answer is no , explain:			
_			☐ Yes ☐ No
E.	Supplemental Assessment (in clai	·	☐ Yes ☐ No
			☐ Yes ☐ No
	Ownership in name of claimant?Date of completion of new const		
		uction	
	Date put to exempt use	If only a portion of the prop	perty is put to an
		d nonexempt portions in detail	, ,
	4. Notice: date mailed		□ Not mailed
	5. Date claim for exemption from S	upplemental Assessment was filed with Assessor	
	6. Date first installment of supplemental tax bill becomes (became) delinquent		
	A claim for veterans' organization		
		No 2. is new this year ☐ Yes ☐ No	
	3. was not filed last year, but claime	ed on another property located at	
_			ode)
G.		2. Denial	(all)
Reason for denial (if partial denial, identify specific area to be denied)			
	Date		
		Bv	