Decemption D		TEAL OF	Gus Kramer	
In ECOLLAR ASSESSMENT http://www.cocounty.us/assessor SUPPECEMENTAL ASSESSMENT	30E-269 VE	-FIR REV. 02 (03-08) TERANS' ORGANIZATION EXEMPTION	2530 Arnold Drive, Suite 100 Martinez, CA 94553-4359 FAX: (925) 313-7488	
SUPPLEMENTAL ASSESSMENT Information for Property No. Year: Name of organization Address of this property		REGULAR ASSESSMENT		
Name of organization Address of this property Owner only Owner only Owner only Owner only If daimant is wore, name of operator is If daimant is primarity: (check only one) 1. charitable 2. other fexpand 1. The primary activity the property is used for is: (check only one) - - -				
Address of this property				
□ Owner only □ Owner-Operator Date of last inspection of property If daimant is operator, name of owner is	Na	me of organization		
If dalmant is owner, name of owner is If dalmant is operator, name of owner is C. Claimant is primarity: (check only one) 1. charitable 2. Other of the primary activity the property is used for is: (check only one) i. medical (not hospital) B. Use of property 1. The primary activity the property is used for is: (check only one) i. medical (not hospital) B. commercial G. functional g. hospital i. medical (not hospital) C. educational g. hospital k. rehabilitation d. farming C. downership h. housing i. informational d. farming D. 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 d. used to house presonce! whose presence is not institutionally necessary C. Operation of property for bonofit of persons i. in your opinion do operations enhance anyone's private gain? Yes No If answer is yos, explain:		Give a service of the	le)	
If claimant is operator, name of owner is A. Calimant is primarily: (check only one) 1. charitable B. Use of property 1. The primary activity the property is used for is: (check only one) a. administration e. fratemal and lodge meetings b. commercial f. fund raising c. c. deucational g. hospital c. deucational g. hospital c. deucational g. hospital c. deucational d. forming c. nother (explain) informational 2. 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 d. used to house presonnel whose presence is not institutionally necessary c. Operation of property for bonefit of persons l. vacant or unused c. in excess of that reasonably necessary? l. In your opinion do operations enhance anyone's private gain? l'ress: No l'ress: No if answer is yee, explain:				
A. Claimant is primarily:				
(check only one) 1. charitable 2. other (explain) B. Use of property 1. The primary activity the property is used for is: (check only one) i. medical (not hospital) B. doministration e. fratemal and lodge meetings i. medical (not hospital) C. downercial g. hospital j. recreational C. educational g. hospital k. rehabilitation d. farming h. housing L. informational m. other (explain) c. in excess of that reasonably necessary d. used to house personnel whose presence is not institutionally necessary 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 1. In your opinion are services and expenses excessive? Yes No ff answer is yee, explain: Yes No 2. In your opinion are balaments proposed new capital investment, if any, necessary? Yes No ff answer is no, explain: Did owner file an exemption claim? Yes No ff answer is no, explain: Did owner file an exemption claim? Yes No ff answer is no, explain: Did owner file an exemption claim? Yes No ff answer is no, explai				
1. The primary activity the property is used for is: (check only one) i. medical (not hospital) a. administration c. fatternal and lodge meetings i. medical (not hospital) b. commercial f. fund raising j. recreational c. educational g. hospital k. rehabilitation d. farming h. housing i. informational m. other (explain) . . 2. Other activities the property is used for are: a. List letters used in B1 . b. Other(explain) . . 3. All or part (with 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 . c. No paration of property for benefit of persons . . 1. In your opinion are services and expenses excessive?		(check only one) 1. charitable 2. other (explain)		
a. administration e. fratemal and lodge meetings i. medical (not hospital) b. commercial f. fund raising j. recreational c. ducational g. hospital j. recreational d. farming h. housing l. informational m. other (explain) . . 3. All or part (write in all or part where applicable) of the property is: a leased or rented	В.			
b. commercial f. fund raising j. recreational c. educational g. hospital k. rehabilitation d. farming h. housing i. informational m. other (explain)				
□ d. farming □ h. housing □ I. informational □ m. other (explain)		b. commercial f. fund raising	j recreational	
2. Other activities the property is used for are: a. List letters used in B1		d. farming h. housing		
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 nurused				
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 c. Operation of property for benefit of persons . 1. In your opinion are services and expenses excessive? . c. In your opinion do operations enhance anyone's private gain? . if answer is yes, explain: . 2. In your opinion do operations enhance anyone's private gain? . if answer is no, explain: . D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant . if answer is no, explain: . D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant . If answer is no, explain: . D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant . If answer is no, explain: . . Did owner file an exemption claim? . . No . . . If answer is yes, explain: . . . Date of change in ownership Ownership in name of claimant? .				
b. vacant or unused				
C. Operation of property for benefit of persons In your opinion are services and expenses excessive? Yes No If answer is yes, explain:		b. vacant or unused c. in excess of that reasonably r	necessary d. used to	
If answer is yes, explain:		C. Operation of property for benefit of persons		
2. In your opinion do operations enhance anyone's private gain? I yes I No If answer is yes, explain: I your opinion is the claimant's proposed new capital investment, if any, necessary? Yes No If answer is no, explain: I yes on explain: I 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: I of womer file an exemption claim? Yes No E. Supplemental Assessment (in claimant's name): Did owner file an exemption claim? Yes No 0. Ownership in name of claimant? Recorded Yes No 2. Date of completion of new construction Explain what was constructed Supplemental Assessment was constructed 3. Date put to exempt use If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail In Not mailed 4. Notice: date mailed If only a portion of the property is put to an exempt use, describe exemption from Supplemental Assessment was filed with Assessor In Not mailed 5. Date claim for exemption from Supplemental tax bill becomes (became) delinquent If Aclaim for veterans' organization exemption on this property: 1. was filed last year Yes No No Is new this year Yes No 3. was not filed last year, but claimed on another property located a		• • •		
If answer is yes, explain:				
3. In your opinion is the claimant's proposed new capital investment, if any, necessary? Yes No If answer is no, explain:				
b. Otherstrip of real property (as of applicable field date) is recorded in each fumile of dating if answer is no, explain:		3. In your opinion is the claimant's proposed new capital investment, if any, necess		
E. Supplemental Assessment (in claimant's name): 1. Date of change in ownership	D.			
1. Date of change in ownership Recorded Yes No Ownership in name of claimant? Seconded Yes No 2. Date of completion of new construction Explain what was constructed Seconded Second			her file an exemption claim? \Box Yes \Box No	
Ownership in name of claimant? 2. Date of completion of new construction Explain what was constructed 3. Date put to exempt use a. Date put to exempt use b. Date put to exempt use c. Notice: date mailed c. Date claim for exemption from Supplemental Assessment was filed with Assessor c. Date first installment of supplemental tax bill becomes (became) delinquent F. A claim for veterans' organization exemption on this property: 1. was filed last year Yes 2. No 2. is new this year 3. was not filed last year, but claimed on another property located at (give complete address including zip code) c. Recommendation: 1. Approval (all) (all) Reason for denial (if partial denial, identify specific area to be denied) Date Inspection for	E.			
 Date of completion of new construction				
 3. Date put to exempt use If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail 4. Notice: date mailed Not mailed 5. Date claim for exemption from Supplemental Assessment was filed with Assessor 6. Date first installment of supplemental tax bill becomes (became) delinquent 7. A claim for veterans' organization exemption on this property: was filed last year Yes No in this year Yes No 6. Recommendation: Approval		2. Date of completion of new construction		
 4. Notice: date mailed		3. Date put to exempt use	If only a portion of the property is put to an	
 5. Date claim for exemption from Supplemental Assessment was filed with Assessor				
 6. Date first installment of supplemental tax bill becomes (became) delinquent				
F. A claim for veterans' organization exemption on this 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				
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	F.			
G. Recommendation: 1. Approval 2. Denial (part) (all) (al		1. was filed last year Yes No 2. is new this year Yes No		
G. Recommendation: 1. Approval 2. Denial (part) (all) _		3. was not filed last year, but claimed on another property located at	(give complete address including size de)	
Reason for denial (if partial denial, identify specific area to be denied)	G.			
Date, Assesso		Reason for denial (if partial denial, identify specific area to be denied)		
By, Designe				
		Ву	, Designe	

