EF-269-FIR-R02-0308-20000421-1 BOE-269-FIR REV. 02 (03-08)

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



## **Brett Frazier Madera County Assessor**

\_\_\_\_ , Designee

200 West 4th Street Madera, CA 93637-3548 Phone: (559) 675-7710 Fax: (559) 675-7654

	EGULAR ASSESSMENT		www.r	maderacounty.com/go	vernment/assessor
	JPPLEMENTAL ASSESSMENT ation for Property No	Vear			
	of organization				
Addres	ss of <i>this</i> property				
	ner only $\square$ Operator only $\square$	Owner-Operator Date of	(street, city, zip code)  I ast inspection of property		
	, ,	•			
	ant is operator, name of owner is				
	nimant is primarily:  neck only one)  1. charitable	2. other (explain)			
	e of property				
1.	The <b>primary activity</b> the propert	y is used for is: (check only or	_		
	a. administration	e. fraternal and lodge		medical (not hosp	ital)
	b. commercial	f. fund raising	<u></u> j.	recreational	
	C. educational	☐ g. hospital	□ k	. rehabilitation	
	d. farming	☐ h. housing	□ 1.	informational	
	m. other (explain)				
2.	Other activities the property is	used for are: a. List letters us	sed in B1		
	b. Other(explain)				
3.	All or part (write in all or part wh	nere applicable) of the propert	y is: a. leased or rented $\_$		
	b. vacant or unused	c. in excess of	that reasonably necessary		d. used to
	house personnel whose present	e is not institutionally necessa	ary		
	Operation of property for bene				
1.	In your opinion are services and	·			☐ Yes ☐ No
•	If answer is <b>yes</b> , explain:				
2.	In your opinion do operations en				☐ Yes ☐ No
2	If answer is <b>yes</b> , explain:				☐ Yes ☐ No
3.	If answer is <b>no</b> , explain:				
D. Ow	vnership of real property (as of	applicable lien date) is record	led in exact name of claima	nt	☐ Yes ☐ No
If a	nswer is <b>no</b> , explain:				
			Did owner file an	exemption claim?	☐ Yes ☐ No
	pplemental Assessment (in clai				
1.	Date of change in ownership				☐ Yes ☐ No
3. 4. 5.	Ownership in name of claimant? Date of completion of new const	ruction			
	Explain what was constructed —				
				a portion of the pro	perty is put to an
	exempt use, describe exempt ar	nd nonexempt portions in deta	il		
	Notice: date mailed				
	Date claim for exemption from S	upplemental Assessment was	filed with Assessor		
6.	Date first installment of supplem	ental tax bill becomes (becam	e) delinquent		
F. <b>A</b> c	claim for veterans' organization	exemption on this property	<b>':</b>		
1.	was filed last year $\ \square$ Yes $\ \square$	No 2. is new this year	☐ Yes ☐ No		
3.	was not filed last year, but claimed on another property located at				
	(give complete address including zij commendation: 1. Approval 2. Denial (part)				
					(all)
Re	eason for denial (if partial denial, identify specific area to be denied)				
Dat	te	Inspection for	or		Assess

Ву \_\_

