EF-269-FIR-R02-0308-33000042-1 BOE-269-FIR REV. 02 (03-08)

REGULAR ASSESSMENT

VETERANS' ORGANIZATION EXEMPTION ASSESSOR'S FIELD INSPECTION REPORT



Peter Aldana Assessor-County Clerk-Recorder

County of Riverside PO Box 751 Riverside, CA 92502-0751 Phone: (951) 955-6200 https://www.rivcoacr.org/

SUPPLEMENTAL ASSESSMENT	_
Information for Property No Year:	
Name of organization	
Address of <i>this</i> property	
Owner only Operator only Owner-Operator Date of last inspection of 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 property1. The primary activity the property is used for is: (check only one)	
	/ (I %)
_	(not hospital)
☐ b. commercial ☐ f. fund raising ☐ j. recreation	
☐ c. educational ☐ g. hospital ☐ k. rehabilit	
☐ d. farming ☐ h. housing ☐ l. informat	ionai
m. other (explain)	
Other activities the property is used for are: a. List letters used in B1	
b. Other(explain)	
b. vacant or unused c. in excess of that reasonably necessary	
house personnel whose presence is not institutionally necessary	a. used to
C. Operation of property for benefit of persons	
In your opinion are services and expenses excessive?	☐ Yes ☐ No
If answer is yes , explain:	
2. In your opinion do operations enhance anyone's private gain?	☐ Yes ☐ No
If answer is yes , explain:	☐ Yes ☐ No
In your opinion is the claimant's proposed new capital investment, if any, necessary?If answer is no, explain:	☐ 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:	
Did owner file an exemption	n claim?
E. Supplemental Assessment (in claimant's name):	
1. Date of change in ownership Rec	
Ownership in name of claimant?	
Date of completion of new construction	
Explain what was constructed — If only a portion	of the property is put to an
exempt use, describe exempt and nonexempt portions in detail	Not mailed
Notice: date mailed Date claim 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	
was not filed last year, but claimed on another property located at	
	including zip code)
G. Recommendation: 1. Approval 2. Denial(part)	(all)
Reason for denial (if partial denial, identify specific area to be denied)	
Date Inspection for	, Assessor
By	Designee