REGULAR ASSESSMENT         Information for Property No.       Year:         Address of this property       (arrest, objection of property No.         Address of this property       (arrest, objection of property No.         If claimant is operator only       Owner-Operator       Date of last inspection of property         If claimant is operator, name of owner is       Image: Comparison of the property       Image: Comparison of the property         Image: Comparison of the property       Image: Comparison of the property is used for is: (check only one)       Image: Comparison of the property is used for is: (check only one)         Image: Comparison of the property is used for is: (check only one)       Image: Comparison of the property is used for is: (check only one)         Image: Comparison of the property is used for is: (check only one)       Image: Comparison of the property is used for is: (check only one)         Image: Comparison of the property is used for are:       Image: Comparison of the property is:       Image: Comparison of the property is:         Image: Comparison of the property is used for are:       Image: Comparison of the property is:       Image: Comparison of the property is:         Image: Comparison of unused       Image: Comparison of the property is:       Image: Comparison of the property is:       Image: Comparison of the property is:         Image: Comparison of unused       Image: Comparison of the property for benefit of persons       Image: Comparison of the p	s <b>sor</b> 3
Information for Property No.       Year:         Name of organization	
Name of organization         Address of this property         Owner only       Operator only       Owner-Operator       Date of last inspection of property         If claimant is owner, name of owner is       If claimant is primarily:       (check only one)       1. charitable       2. other (explain)         B. Use of property       1. charitable       2. other (explain)       Image: check only one)       Image: check only one)         1. The primary activity the property is used for is: (check only one)       Image: check only one)       Image: check only one)         1. The primary activity the property is used for is: (check only one)       Image: check only one)       Image: check only one)         1. The primary activity the property is used for is: (check only one)       Image: check only one)       Image: check only one)         1. The primary activity the property is used for is: (check only one)       Image: check only one)       Image: check only one)         1. The primary activity the property is used for are: a check only one)       Image: check only one)       Image: check only one)         2. educational       1. hoospital       Image: check only one)       Image: check only one)         2. Other activities the property is used for are: a chist letters used in B1       Image: check only one)       Image: check only one)         3. All or part (write in all or part where applicable) of the property is: a leased or rented	
Address of this property       [street. etty. zip code]         Owner only       Operator only       Owner-Operator       Date of last inspection of property         If claimant is owner, name of owner is       .       .         A. Claimant is primarily:       (check only one)       1. charitable       2. other (explain)         B. Use of property       1. charitable       2. other (explain)       .         B. Use of property       1. charitable       2. other (explain)       .         C. administration       e. fraternal and lodge meetings       i. medical (not he         b. commercial       f. fund raising       j. recreational         c. educational       g. hospital       k. rehabilitation         d. farming       h. housing       I. informational         d. farming       h. housing       I. informational         b. commercial model       c. in excess of that reasonably necessary         house personnel whose presence is not institutionally necessary       .         house personnel whose presence is not institutionally necessary       .         house personnel whose epresence is not institutionally necessary       .         house personnel whose epresence is not institutionally necessary       .         f answer is yes, explain:       .         c. In your opinion do ope	
□ Owner only       □ Operator only       □ Owner-Operator       Date of last inspection of property         If claimant is owner, name of operator is	
If claimant is owner, name of owner is   A. Claimant is primarily:   (check only one)   1. The primary activity the property is used for is: (check only one)   a. administration   b. commercial   c. educational   g. hos commercial   d. f. fund raising   i. medical (not he   c. educational   g. hospital   i. medical (not he   c. educational   g. hospital   i. nother (explain)   2. Other activities the property is used for are: a. List letters used in B1 b. Vacant or unused c. in excess of that reasonably necessary house personnel whose presence is not institutionally necessary house personnel whose presence is not institutionally necessary framewr is yes, 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. Operation of property for benefit of persons 1. In your opinion are services and expenses excessive? If answer is yes, explain: 3. In your opinion is the claimant's proposed new capital investment, if any, necessary? If answer is no, explain: Downership of real property (as of applicable lien date) is recorded in exact name of claimant If answer is no, explain: 2. Date of completion of new construction E. Supplemental Assessment (in claimant's name): 1. Date of change in ownership C. Det of completion of new construction E. Supplemental Assessment (in claimant? 2. Date of completion of new construction Explain what was constructed 3. Date of completion of new construction Explain what was constructed 3. Date of completion of new construction Explain what was constructe	
If claimant is operator, name of owner is   A. Claimant is primarily:   (check only one)   1. The primary activity the property is used for is: (check only one)   a. administration   b. commercial   c. educational   g. hospital   w. other (explain)   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 b. vacant or unused c. operation of property for benefit of persons 1. In your opinion do operations enhance anyone's private gain? If answer is yes, explain: 2. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant If answer fis no, explain: D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant If answer is no, explain: 2. Date of completion of new construction Explain what was constructed 3. Date of completion of new construction Explain what was constructed 3. Date of completion of new construction 4. Date of change in ownership 6. Date of completion of new construction 5.	
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) <ul> <li>a. administration</li> <li>e. fraternal and lodge meetings</li> <li>i. medical (not he</li> <li>b. commercial</li> <li>f. fund raising</li> <li>j. recreational</li> <li>g. hospital</li> <li>k. rehabilitation</li> <li>d. farming</li> <li>h. housing</li> <li>i. informational</li> <li>m. other (explain)</li> <li>2. Other activities the property is used for are:</li> <li>a. List letters used in B1</li> <li>b. Other(explain)</li> <li>3. All or part (write in all or part where applicable) of the property is:</li> <li>a. leased or rented</li> <li>b. vacant or unused</li> <li>c. in excess of that reasonably necessary</li> <li>house personnel whose presence is not institutionally necessary</li> <li>house personnel whose presence is not institutionally necessary</li> <li>In your opinion are services and expenses excessive?</li> <li>If answer is yes, explain:</li> <li>In your opinion do operations enhance anyone's private gain?</li> <li>If answer is no, explain:</li> <li>D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant</li> <li>If answer is no, explain:</li> <li>Date of change in ownership</li> <li>Recorded</li> <li>Ownership in name of claimant?</li> <li>Date of change in ownership</li> <li>Recorded</li> <li>Ownership in name of claimant?</li> <li>Date of completion of new construction</li> <li>Explain what was constructed</li> <li>Date of completion of new construction</li> <li>Explain what was constructed</li> <li>Date of change in ownership</li></ul>	
1. The primary activity the property is used for is: (check only one)       i. medical (not ho         a. administration       e. fratemal and lodge meetings       i. medical (not ho         b. commercial       f. fund raising       j. recreational         c. educational       g. hospital       k. rehabilitation         d. farming       h. housing       l. informational         m. other (explain)       c.       Other activities the property is used for are: a. List letters used in B1         b. Other(explain)       c. in excess of that reasonably necessary       house personnel whose presence is not institutionally necessary         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       1       In your opinion are services and expenses excessive?         If answer is yes, explain:       .       .         3. In your opinion do operations enhance anyone's private gain?       .         If answer is yes, explain:       .       .         3. In your opinion is the claimant's proposed new capital investment, if any, necessary?       .         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:	
a. administration       e. fraternal and lodge meetings       i. medical (not hot         b. commercial       f. fund raising       j. recreational         c. educational       g. hospital       k. rehabilitation         d. farming       h. housing       l. 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 (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       .       .       .         b. vacant or unused       c. in excess of that reasonably necessary       .       .         c. In your opinion do operations enhance anyone's private gain?       .       .       .         If answer is yes, explain:       .       .       .       .       .         3. In your opinion is the claimant's proposed new capital investment, if any, necessary?       .       .       .       .         f answer is no, explain:	
b. commercial       f. fund raising       j. recreational         c. educational       g. hospital       k. rehabilitation         d. farming       h. housing       l. 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 (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. In your opinion are services and expenses excessive?	
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 b. vacant or unused	spital)
<ul> <li>3. All or part (write in all or part where applicable) of the property is: a. leased or rented</li></ul>	
b. vacant or unused	
house personnel whose presence is not institutionally necessary         C. Operation of property for benefit of persons         1. In your opinion are services and expenses excessive?         If answer is yes, explain:         2. In your opinion do operations enhance anyone's private gain?         If answer is yes, explain:         3. In your opinion is the claimant's proposed new capital investment, if any, necessary?         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         E. Supplemental Assessment (in claimant's name):         1. Date of change in ownership         2. Date of completion of new construction         Explain what was constructed         3. Date put to exempt use         If only a portion of the person	
<ul> <li>C. Operation of property for benefit of persons <ol> <li>In your opinion are services and expenses excessive?</li> <li>If answer is yes, explain:</li></ol></li></ul>	d. used to
<ol> <li>In your opinion are services and expenses excessive?         If answer is yes, explain:</li></ol>	
<ul> <li>2. In your opinion do operations enhance anyone's private gain? <ul> <li>If answer is yes, explain:</li> <li>3. In your opinion is the claimant's proposed new capital investment, if any, necessary? <ul> <li>If answer is no, explain:</li> <li>D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant</li> <li>If answer is no, explain:</li> <li> Did owner file an exemption claim</li> </ul> </li> <li>E. Supplemental Assessment (in claimant's name): <ul> <li>1. Date of change in ownership</li> <li>Quereship in name of claimant?</li> </ul> </li> <li>2. Date of completion of new construction</li> <li>Explain what was constructed</li> <li>3. Date put to exempt use</li> <li> If only a portion of the performance of the performance</li></ul></li></ul>	🗌 Yes 🗌 No
<ul> <li>3. In your opinion is the claimant's proposed new capital investment, if any, necessary? If answer is no, explain:</li></ul>	🗌 Yes 🗌 No
If answer is no, explain:	🗌 Yes 🗌 No
<ul> <li>E. Supplemental Assessment (in claimant's name):</li> <li>1. Date of change in ownership Recorded Ownership in name of claimant? Recorded</li> <li>2. Date of completion of new construction</li> <li>Explain what was constructed If only a portion of the pexempt use, describe exempt and nonexempt portions in detail</li> </ul>	🗌 Yes 🗌 No
<ol> <li>Date of change in ownership Recorded Ownership in name of claimant?</li> <li>Date of completion of new construction</li> <li>Explain what was constructed</li> <li>Date put to exempt use If only a portion of the performance of the perfor</li></ol>	Yes 🗌 No
Ownership in name of claimant?         2. Date of completion of new construction	
Explain what was constructed If only a portion of the performance of the perfo	
<ol> <li>Date put to exempt use If only a portion of the performance of the pe</li></ol>	
	roperty is put to an
4 Notice: date mailed	
5. Date claim for exemption from Supplemental Assessment was filed with Assessor	
6. Date first installment of supplemental tax bill becomes (became) delinquent	
<ul> <li>F. A claim for veterans' organization exemption on <i>this</i> property:</li> <li>1. was filed last year  Yes  No  2. is new this year  Yes  No</li> </ul>	
3. was not filed last year, but claimed on another property located at	
G. Recommendation: 1. Approval 2. Denial	(all)
Reason for denial (if partial denial, identify specific area to be denied)	
Date Inspection for	
By	

