EF-269-FIR-R02-0308-01000088-1 BOE-269-FIR REV. 02 (03-08)

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



## Phong La ALAMEDA COUNTY ASSESSOR

1221 Oak St., Rm 145 Oakland, Ca. 94612-4288 (510) 272-6587 / FAX (510) 272-3803 www.acgov.org/assessor

	REGULAR ASSESSMENT SUPPLEMENTAL ASSESSMENT		www.aagav.a.g.aaaaaaa	,
		Year:		
Name of organization				
Address of <i>this</i> property				
О	wner only $\Box$ Operator only $\Box$	Owner-Operator Date of last ins	spection of property	
If clai	mant is owner, name of operator is			
If clai	mant is operator, name of owner is			
	laimant is primarily: check only one)  1. charitable	2. other (explain)		
B. <b>U</b>	lse of property			
1. The <b>primary activity</b> the property is used for is: (check only one)				
	a. administration b. commercial c. educational d. farming m. other (explain)	e. fraternal and lodge meeti f. fund raising g. hospital h. housing	ings i. medical (not h j. recreational k. rehabilitation l. informational	osp <mark>i</mark> tal)
2	. Other activities the property is	used for are: a. List letters used in E	31	
3		pere applicable) of the property is: a c. in excess of that re te is not institutionally necessary		d. used to
	Operation of property for bene In your opinion are services and	expenses excessive?		Yes No
2	If answer is <b>yes</b> , explain:  In your opinion do operations en			Yes No
	If answer is <b>yes</b> , explain:	hance anyone's private gain:		
3		proposed new capital investment, if a	any, necessary?	☐ Yes ☐ No
D 0		applicable lien date) is recorded in e	exact name of claimant	☐ Yes ☐ No
	answer is <b>no</b> , explain:		west riams of stament	
_			Did owner file an exemption clain	n?
	upplemental Assessment (in clai			
1.	Date of change in ownership		Recorded	d ∐ Yes ∐ No
2	Ownership in name of claimant?  Date of completion of new const	ruction		
3.	Explain what was constructed —  Date put to exempt use		If only a portion of the	property is put to an
	exempt use, describe exempt an	d nonexempt portions in detail		
	. Notice: date mailed			
		upplemental Assessment was filed w		
		ental tax bill becomes (became) delir	nquent	
	claim for veterans' organization			
		No 2. is new this year ☐ Yes		
3	. was not filed last year, but claime	ed on another property located at	(give complete address including	g zip code)
	ecommendation: 1. Approval		2 Donial	
		(all) dentify specific area to be denied)	(part)	(all)
D	ate	·		
		Bv		. Designee

