BOE-269 VE AS	P-FIR-R02-0308-13000298-1 P-FIR REV. 02 (03-08) TERANS' ORGANIZATION EXEMPTION SESSOR'S FIELD INSPECTION REPORT REGULAR ASSESSMENT SUPPLEMENTAL ASSESSMENT prmation for Property NoYear:	CHARLE COLLEGE	Imperial 940 W. Ma El Centro, Main Office Website: a	Menvielle County Asse in Street Suite 11 CA 92243 e: (442) 265-1300 ssessor.imperialo	5
Na	me of organization				
Ad	dress of <i>this</i> property				
	Owner only Operator only Owner-Operator	Date of last insp	city, zip code) ection of property		
	Claimant is primarily: (check only one) 1. charitable 2. other (explain)				
В.	Use of property				
	1. The primary activity the property is used for is: (check	(only one)	_		
	a. administration e. fraternal a b. commercial f. fund raisin c. educational g. hospital d. farming h. housing m. other (explain) f. fund raisin	nd lodge meeting	j. re k. re	edical (not hosp creational habilitation formational	ital)
	2. Other activities the property is used for are: a. List letters used in B1				
	b. Other(<i>explain</i>)				-
	 All or part (write in all or part where applicable) of the b. vacant or unused c. in exhouse personnel whose presence is not institutionally in 	cess of that reas			d. used to
	 C. Operation of property for benefit of persons 1. In your opinion are services and expenses excessive? 			i	🗆 Yes 🗌 No
	 If answer is yes, explain: In your opinion do operations enhance anyone's privat If answer is yes, explain: 	e gain?			Yes No
	 In your opinion is the claimant's proposed new capital if answer is no, explain: 	investment, if an	y, necessary?		🗌 Yes 🗌 No
D.	Ownership of real property (as of applicable lien date) is If answer is no, explain:	s recorded in exa	ct name of claimant		🗌 Yes 🗌 No
_			Did owner file an exe	mption claim?	🗌 Yes 🗌 No
E.	Supplemental Assessment (in claimant's name): 1. Date of change in ownership			_ Recorded	🗌 Yes 🗌 No
	Ownership in name of claimant? 2. Date of completion of new construction				
	Explain what was constructed3. Date put to exempt use		If only a p		
	exempt use, describe exempt and nonexempt portions				
	4. Notice: date mailed				
	 Date claim for exemption from Supplemental Assessm Date first installment of supplemental tax bill becomes 				
F.	A claim for veterans' organization exemption on <i>this</i> p				
		year 🗌 Yes 🛛	□ No		
	 was not filed last year, but claimed on another property 	-			
G			(give complete 2. Denial	address including zip	
0.	Recommendation: 1. Approval				(all)
	Date Inspe				

