EF-269-FIR-R02-0308-16000092-1 BOE-269-FIR REV. 02 (03-08)

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



## Office of the Assessor Kings County

1400 W. Lacey Blvd. Hanford, CA. 93230 559-852-2486 fax 559-582-2794

☐ REGULAR ASSESSMENT	4,800	1ax 339-302-2794	
SUPPLEMENTAL ASSESSMENT			
Information for Property No	Year:		
Name of organization			
Address of <i>this</i> property	7-1	ath a second t	
$\square$ Owner only $\square$ Operator only $\square$	Owner-Operator Date of last insp	pection 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 property			
<ol> <li>The primary activity the proper</li> </ol>	ty is used for is: (check only one)		
□ a. administration □ b. commercial □ c. educational □ d. farming □ m. other (explain)	e. fraternal and lodge meeting f. fund raising g. hospital h. housing	gs i. medical (not hose j. recreational k. rehabilitation l. informational	spital)
	used for are: a. List letters used in B1	1	
b. Other(explain)			_
b. vacant or unused	there applicable) of the property is: a.  c. in excess of that reace is not institutionally necessary		d. used to
<ul><li>C. Operation of property for ben</li><li>1. In your opinion are services and</li><li>If answer is yes, explain:</li></ul>			☐ Yes ☐ No
In your opinion do operations er			Yes No
If answer is <b>yes</b> , explain:			100 _ 110
	proposed new capital investment, if an	ıy, <mark>necess</mark> ary?	☐ Yes ☐ No
	appliable lies data) is recorded in av	out name of claimant	☐ Yes ☐ No
D. Ownership of real property (as of If answer is no, explain:		act name of claimant	□ 1C3 □ 140
ii aliswei is <b>iio</b> , explaili.		Did owner file an exemption claim?	Yes No
E. Supplemental Assessment (in cla 1. Date of change in ownership		Recorded	☐ Yes ☐ No
Ownership in name of claimant'  2. Date of completion of new cons	?		
Explain what was constructed –			
Date put to exempt use		If only a portion of the p	roperty is put to an
	nd nonexempt portions in detail		
	na nenexempt pertiene in detail		
	Supplemental Assessment was filed wit		
	nental tax bill becomes (became) delino		
F. A claim for veterans' organization			
1. was filed last year 🔲 Yes 🗀	No 2. is new this year ☐ Yes [	□ No	
was not filed last year, but claim	ned on another property located at		
G. Recommendation: 1. Approval	(all)	2. Denial	(all)
Reason for denial (if partial denial,	identify specific area to be denied)		
Date			
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	- <i>,</i>		,

