EF-269-FIR-R02-0308-30000144-1 BOE-269-FIR REV. 02 (03-08)

REGULAR ASSESSMENT

VETERANS' ORGANIZATION EXEMPTION ASSESSOR'S FIELD INSPECTION REPORT



Claude Parrish Orange County Assessor

Civic Center Plaza, Building 11 625 N. Ross Street, Room 142 P.O. Box 628 Santa Ana, CA 92702-0628 (714) 834-5945 www.ocgov.com/assessor

SUPPLEMENTAL ASSESSMENT		www.ocgov.com/assessor	
Information for Property No			
Name of organization			
Address of <i>this</i> property	(stre	et, city, zip code)	
☐ Owner only ☐ Operator only ☐ O	wner-Operator Date of last ins	spection of property	
If claimant is owner, name of operator is _			
If claimant is operator, name of owner is			
A. Claimant is primarily:			
	」2. other <i>(explain)</i>		
B. Use of property			
1. The primary activity the property i			
□ a. administration □ b. commercial □ c. educational □ d. farming □ m. other (explain)	e. fraternal and lodge meeti f. fund raising g. hospital h. housing	j. recreational k. rehabilitation l. informational	1
		31	
	An		
3. All or part (write in all or part when		a. leased or rentedeasonably necessary	d. used to
house personnel whose presence	is not institutionally necessary	easonably necessary	d. used to
C. Operation of property for benefit			
1. In your opinion are services and ex			☐ Yes ☐ No
If answer is yes , explain:			
2. In your opinion do operations enha			Yes No
If answer is yes , explain: 3. In your opinion is the claimant's pro- If answer is no , explain:	pposed new capital investment, if a	any, <mark>necess</mark> ary?	☐ Yes ☐ No
D. Ownership of real property (as of ap	nlicable lion date) is recorded in s	yact name of claimant	☐ Yes ☐ No
If answer is no , explain:		Add Hame of claimant	
in anower to no, explain.		Did owner file an exemption claim?	☐ Yes ☐ No
E. Supplemental Assessment (in claims			
Date of change in ownership		Recorded	☐ Yes ☐ No
Ownership in name of claimant? —			
2. Date of completion of new construction	ction		
Explain what was constructed ——		If only a portion of the pr	onerty is nut to an
		If only a portion of the pr	
		vith Assessor	
		nquent	
F. A claim for veterans' organization ex	xemption on <i>this</i> property:		
 was filed last year ☐ Yes ☐ N 			
3. was not filed last year, but claimed	on another property located at	(give complete address including zij	
G. Recommendation: 1. Approval			
	* *		
Reason for denial (if partial denial, idea			
Date			

