EF-267-FIR-R02-0308-40000032-1

BOE-267-FIR REV. 02 (03-08)

## WELFARE EXEMPTION ASSESSOR'S FIELD INSPECTION REPORT



Office of Tom J. Bordonaro, Jr. San Luis Obispo County Assessor County Government Center 1055 Monterey Street, Suite D360 San Luis Obispo, CA 93408 Telephone (805) 781-5643 Fax: (805) 781-5641 Email: Assessor@co.slo.ca.us

Information for Property No	Year:	REGULAR ASSESSMENT Email: Assessor@co.slo.ca	.us
Address of this property	Information for Property No	_ SUPPLEMENTAL ASSESSMENT Web Site: slocounty.ca.gov/	assessor
Owner only       Operator only       Owner-Operator       Date of last inspection of property         If claimant is owner, name of operator is	-		
Owner only       Operator only       Owner-Operator       Date of last inspection of property         If claimant is owner, name of operator is       If claimant is owner, is       If claimant is owner, is         A       Claimant is primarily: (check only one)       1, religious       2, hospital       3, scientific       4, charitable         So ther (explain)       Image: intervention of the property         Image: intervention of the property is used for is: (check only one)       Image: intervention of the property       Image: intervention of the property         Image: intervention of the property       Image: intervention of the property       Image: intervention of the property       Image: intervention of the property         Image: intervention of property for benefit of persons       Image: intervention of property       Image: intervention of property       Image: intervention of property         Image: intervention of property for benefit of persons       Image: intervention of property       Image: intervention of property       Image: intervention of intervention of property       Image: intervention of intervention of intervention of property       Image: intervention of intervention of persons       Image: intervention of persons       Image: intervention of persons       Image: intervention of intervention of intervention of persons       Image: intervention of persons       Im	Address of <i>this</i> property	(street, city, zip code)	
<pre>if claimant is operator, name of owner is</pre>	□ Owner only □ Operator only □ Owner-Operator		
A. Claimant is primarily: (check only one)       1. religious       2. hospital       3. scientific       4. charitable	If claimant is owner, name of operator is		
B. Use of property     I. The primary activity the property is used for is: ( <i>check only one</i> )     a. administration     b. commercial     c. educational     g. hospital     d. farming     d. farm			
B. Use of property         1. The primary activity the property is used for isr ( <i>check only one</i> )         a. administration       c. internal and longe meetings         b. commercial       f. fund raising         c. educational       g. hospital         d. farming       h. hospital         m. other (explain)       i. informational         c. ducational       g. hospital         b. Other (explain)       i. informational         c. ducational       g. hospital         b. Other (explain)       i. informational         c. ducational       g. hospital         b. Other (explain)       i. informational         d. farming       i. informational         b. Other (explain)       i. informational         d. large property is used for are:       a. List letters used in B1         b. Other (explain)       d. used to nouse personne whole presence is not institutionally necessary         1. In your opinion as explain:       g. in excess of their reasonably necessary?         2. In your opinion as explain:       Yes         D. Oversethip of real property (as of applicable lien date) is recorded in exact name of claimant       Yes         1. In your opinion is the claimant's proposed new capital investment, if any, necessary?       Yes       No         If answer is no, explain:		religious 🗌 2. hospital 🔲 3. scientific 🔲 4. charitable	
1. The primary activity the property is used for its (check only one)       i. medical (not hospital)         b. commercial       f. fund raising       j. recreational         c. educationan       g. hospital       i. medical (not hospital)         d. farming       h. housing       i. informational         d. d. farming       h. housing       i. informational         d. d. farming       h. housing       i. informational         d. d. farming       i. in housing       i. informational         b. Other activities the property is used for are:       a. List letters used in B1       i. informational         b. Other activities the property is used for are:       a. List letters used in B1       i. informational         b. Other activities duration of property for benefit of presons       d. used to house personnel whose presence is not institutionally necessary       d. used to house personnel whose anyone's private gain?         1. In your opinion do operations enhance anyone's private gain?       Yes       No         1f answer is yes, explain:       Yes       No         2. In your opinion do perperty (as of applicable lien date) is recorded in exact name of claimant       Yes       No         1. In your opinion the claimant's name):       Did owner file ar exemption claim?       Yes       No         2. Bate put to exampt use       capiant?       Yes			
□       a. administration       □       e. Instantal and lodge meetings       □       i. medical (not hospital)         □       b. commercial       □       f. f. fund raising       □       j. precrational         □       c. educational       □       f. f. fund raising       □       j. precrational         □       d. farming       □       in housing       □       i. informational         □       o. other (explain)       □       i. informational       □         3. All or part (write in all or part where applicable) of the property is:       a. leased or reinted       □         b. vacant or unused       □       o. in excess of that reasonably necessary       □       d. used to nouse personnel whose presence is not institutionally necessary       □       d. used to nouse personnel whose presence is not institutionally necessary       □       d. used to nouse personnel whose presence is not institutionally necessary       □       d. used to nouse personnel whose presence is not institutionally necessary       □       d. used to nouse personnel whose presence is not institutionally necessary       □       d. used to nouse personnel whose presence is not institutionally necessary       □       d. used to nouse personnel noise be chainants proposed new capital investment. If any, meessary       □       Yes       No         1       nay our opinion is the chainants proposed new capital investment. If any,			
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         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 to 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?         Yes       No         If answer is no, explain:         D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant       Yes         No         If answer is no, explain:       Did owner file an exemption claim?       Yes         No         If answer is no, explain:       Did owner file an exemption claim?       Yes         No         Unstant of exemption of new construction       Explain what was constructed       Explain what was constructed         2. Date of completion of new construction       Explain what was constructed       If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail       If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail       If only a portion of the property is put to an exempt use, desc	a. administration     e       b. commercial     f.       c. educational     g       d. farming     h	. fraternal and lodge meetings i. medical (no fund raising j. recreationa hospital k. rehabilitatio	l m
<ul> <li>All or part (write in all or part where applicable) of the property is: a leased or rented</li></ul>		List letters used in B1	
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:         D. Ownership in name of claimant's name):         1. Date of change in ownership         Recorded         Yes         No         Use of change in ownership         Represented         Yes         No         Ownership in name of claimant?         If only a portion of the property is put to an exempt use describe exempt and nonexempt portions in detail         Explain what was constructed         3. Date put to exemption from Supplemental Assessment was filed with Assessor         6. Date first installment of supplemental tax bill becomes (became) delinquent         F. A claim for welfare exemption on this property:       1. was filed last year         Yes       No         3. was not filed last year but claime			<b></b>
C. Operation of property for benefit of persons			d. used to
1. In your opinion are services and expenses excessive?       Yes       No         If answer is yes, explain.       Yes       No         2. In your opinion do operations enhance anyone's private gain?       Yes       No         If answer is no, explain:       Yes       No         Downership of real property (as of applicable lien date) is recorded in exact name of claimant       Yes       No         If answer is no, explain:       Did owner file an exemption claim?       Yes       No         If answer is no, explain:       Did owner file an exemption claim?       Yes       No         If answer is no, explain:       Did owner file an exemption claim?       Yes       No         If answer is no, explain:       Did owner file an exemption claim?       Yes       No         1. Date of change in ownership       Recorded       Yes       No         Ownership in name of claimant?       Recorded       Yes       No         2. Date of completion of new construction       Explain what was constructed       Supplemental Assessment was filed with Assessor       If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail         4. Notice: date mailed       If only a portion of the property is put to an exempt use, describe exemption from Supplemental Assessment was filed last year       Yes       No         3. Date fi		nstitutionally necessary	
If answer is yes, explain          If answer is yes, explain       In your opinion do operations enhance anyone's private gain?       Ives       No         If answer is yes, explain:       Ives       No         In your opinion is the claimant's proposed new capital investment, if any, necessary?       Ves       No         If answer is no, explain:       Ives       Ves       No         Ownership of real property (as of applicable lien date) is recorded in exact name of claimant       Yes       No         If answer is no, explain:       Did owner file an exemption claim?       Yes       No         If answer is no, explain:       Did owner file an exemption claim?       Yes       No         If answer is no, explain:       Did owner file an exemption claim?       Yes       No         1. Date of change in ownership       Recorded       Yes       No         2. Date of completion of new construction       Explain what was constructed       Supplemental Assessment (in claimant?       Notice: date mailed       If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail       If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail       Notice: date mailed       Not mailed       Not mailed         5. Date claim for exemption from Supplemental Assessment was filed with Assessor       No 2 is new this year       Yes       No		ccessive?	🗌 Yes 🗌 No
<ul> <li>In your opinion do operations enhance anyone's private gain?</li> <li>If answer is yes, explain:</li> <li>In your opinion is the claimant's proposed new capital investment, if any, necessary?</li> <li>Yes No</li> <li>If answer is no, explain:</li> <li>Ownership of real property (as of applicable lien date) is recorded in exact name of claimant</li> <li>Yes No</li> <li>If answer is no, explain:</li> <li>Did owner file an exemption claim?</li> <li>Yes No</li> <li>If answer is no explain:</li> <li>Did owner file an exemption claim?</li> <li>Yes No</li> <li>If answer is no explain:</li> <li>Did owner file an exemption claim?</li> <li>Yes No</li> <li>If answer is no explain:</li> <li>Did owner file an exemption claim?</li> <li>Yes No</li> <li>No</li> <li>Supplemental Assessment (in claimant's name):</li> <li>Date of change in ownership</li> <li>Recorded</li> <li>Yes No</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 exempt use</li> <li>generation of the property is put to an exempt use, describe exempt and nonexempt portions in detail</li> <li>Notice: date mailed</li> <li>Date claim for exemption on this property:</li> <li>I. was filed with Assessor</li> <li>Date first installment of supplemental Assessment was filed with Assessor</li> <li>Date first installment of supplemental tax bill becomes (became) delinquent</li> <li>F. A claim for welfare exemption on this property:</li> <li>I. was filed last year</li> <li>Yes No</li> <li>Was not file last year but claimed on another property located at <i>(part) (ali)</i></li> <li>Reason for denial (if partial denial, identify specific area to be denied)</li> <li>Date</li> <li>Inspection for</li> <li>Assessor</li> <li>By</li> <li>Designee</li> </ul>			1
3. In your opinion is the claimant's proposed new capital investment, if any, necessary?       Yes       No         If answer is no, explain:	2. In your opinion do operations enhance anyone's		🗌 Yes 🗌 No
If answer is no, explain:		anital investment if any necessary?	
D. Ownership of real property (as of applicable lien date) is recorded in exact name of claimant       Yes       No         If answer is no, explain:			
If answer is no, explain:       Did owner file an exemption claim?       Yes       No         E. Supplemental Assessment (in claimant's name):       Did owner file an exemption claim?       Yes       No         Ownership in name of claimant?       Recorded       Yes       No         Ownership in name of claimant?       Recorded       Yes       No         Ownership in name of claimant?       Recorded       Yes       No         Ownership in name of claimant?       If only a portion of the property is put to an exempt use, describe exempt and nonexempt portions in detail       Notice: date mailed       Not mailed         3. Date put to exempt use, describe exempt and nonexempt portions in detail       If only a portion of the property is put to an exempt use, describe exemption from Supplemental Assessment was filed with Assessor       Not mailed         5. Date claim for exemption on this property:       1. was filed last year       Yes       No         3. was not filed last year but claimed on another property located at       (give complete address including zip code)       (aii)         G. Recommendation:       1. Approval       2. Denial       (part)       (aii)         Date       Inspection for       , Assessor       , Assessor         By	•		Yes No
E. Supplemental Assessment (in claimant's name):   1. Date of change in ownership	If answer is <b>no</b> , explain:		
1. Date of change in ownership	E Supplemental Accessment (in claimant's name	Did owner file an exemption claim?	🗌 Yes 🗌 No
Ownership in name of claimant?         2. Date of completion of new construction			Ves No
2. Date of completion of new construction	Ownership in name of claimant?		
Explain what was constructed			
exempt use, describe exempt and nonexempt portions in detail			
<ul> <li>4. Notice: date mailed</li></ul>	3. Date put to exempt use	If only a portion of the prope	erty is put to an
<ul> <li>5. Date claim for exemption from Supplemental Assessment was filed with Assessor</li></ul>			
<ul> <li>6. Date first installment of supplemental tax bill becomes (became) delinquent</li></ul>			
F. A claim for welfare exemption on this property:       1. was filed last year       Yes       No       2. is new this year       Yes       No         3. was not filed last year but claimed on another property located at			
3. was not filed last year but claimed on another property located at			
G. Recommendation: 1. Approval 2. Denial (all) (all) (all) (all) (all)			
Reason for denial (if partial denial, identify specific area to be denied)         Date			ip code)
Date, Assessor, Assessor By, Designee			
By, Designee	Reason for denial (if partial denial, identify spe	cific area to be denied)	
	Date		
		Ву	, Designee