EF-269-FIR-R02-0308-43000328-1 BOE-269-FIR REV. 02 (03-08)

VETERANS' ORGANIZATION EXEMPTION ASSESSOR'S FIELD INSPECTION REPORT



Lawrence E. Stone Santa Clara County Assessor

Exemption Division 70 W. Hedding St, East Wing, 5th Floor San Jose, CA 95110 Ph: (408) 299-6460 FAX: (408) 271-8812 exemptions@asr.scrgov.org

REGULAR ASSESSMENT SUPPLEMENTAL ASSESSMENT		exemptions@asr.sccgov.org www.sccassessor.org
	Year:	<u> </u>
Address of <i>this</i> property	(stree	
Owner only Operator only	Owner-Operator Date of last ins	et, city, zip code) spection of property
If claimant is owner, name of operato		
If claimant is operator, name of owne	ur io	
A. Claimant is primarily:		
	able 2. other (explain)	
B. Use of property	,	
1. The primary activity the pro	operty is used for is: (check only one)	
 □ a. administration □ b. commercial □ c. educational □ d. farming □ m. other (explain) 	e. fraternal and lodge meetin f. fund raising g. hospital h. housing	i. medical (not hospital) j. recreational k. rehabilitation l. informational
	ty is used for are: a. List letters used in B	31
b. Other(explain)		
b. vacant or unused	art where applicable) of the property is: a. c. in excess of that reasesence is not institutionally necessary	
C. Operation of property for1. In your opinion are servicesIf answer is yes, explain:	s and expenses excessive?	☐ Yes ☐ No
	ns enhance anyone's private gain?	☐ Yes ☐ No
If answer is yes , expla <mark>in</mark> :		
* · · · · · · · · · · · · · · · · · · ·	ant's <mark>propose</mark> d new cap <mark>ita</mark> l investm <mark>en</mark> t, if a	ny, <mark>necess</mark> ary?
If answer is no , explain:		xact name of claimant
/	as of applicable lien date) is recorded in ex	kact name of claimant
ii aliswei is iio , explaili.		_ Did owner file an exemption claim? ☐ Yes ☐ No
Supplemental Assessment (in 1. Date of change in ownershi	ip	Recorded
Ownership in name of claim 2. Date of completion of new of	construction	
Explain what was constructed. 3. Date put to exempt use		If only a portion of the property is put to an
Notice: date mailed		□ Not mailed
		ith Assessor
		nquent
F. A claim for veterans' organiza	ation exemption on <i>this</i> property:	
	☐ No 2. is new this year ☐ Yes	
3. was not filed last year, but o	claimed on another property located at	(give complete address including zip code)
G. Recommendation: 1. Approve		2 Denial
	(all)	(part) (all)
Data		A
Date	•	, Assessor , Designee
	Бу	, Designee

