EF-269-FIR-R02-0308-16000323-1 BOE-269-FIR REV. 02 (03-08)

REGULAR ASSESSMENT SUPPLEMENTAL ASSESSMENT

VETERANS' ORGANIZATION EXEMPTION ASSESSOR'S FIELD INSPECTION REPORT



Kristine Lee Kings County Assessor

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

Information for Property No	Year:	
Name of organization		
Address of <i>this</i> property	(street, city, zip code)	
\square Owner only \square Operator only \square	Owner-Operator Date of last inspection 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		
 The primary activity the proper 	ty is used for is: (check only one)	
a. administration	\square e. fraternal and lodge meetings \square i. medical (not hosp	ital)
☐ b. commercial	☐ f. fund raising ☐ j. recreational	
C. educational	☐ g. hospital ☐ k. rehabilitation	
\square d. farming	\square h. housing \square I. informational	
2. Other activities the property is	used for are: a. List letters used in B1	
	there applicable) of the property is: a. leased or rented	
b. vacant or unusedhouse personnel whose present	c. in excess of that reasonably necessary ce is not institutionally necessary	d. used to
C. Operation of property for ben		
 In your opinion are services and 	d expenses excessive?	☐ Yes ☐ No
In your opinion do operations er		☐ Yes ☐ No
·	proposed new capital investment, if any, necessary?	☐ Yes ☐ No
•	amplicable tion data) is recorded in exact name of element	☐ Yes ☐ No
	applicable lien date) is recorded in exact name of claimant	□ 1C3 □ 1NO
If answer is no , explain:	Did owner file an exemption claim?	☐ Yes ☐ No
E. Supplemental Assessment (in clair		□ 162 □ 140
	Recorded	☐ Yes ☐ No
	?	
Date of completion of new const	truction	
Explain what was constructed –		
3. Date put to exempt use		perty is put to an
exempt use, describe exempt a	nd nonexempt portions in detail	
4. Notice: date mailed		
	Supplemental Assessment was filed with Assessor	
Date first installment of supplem	nental tax bill becomes (became) delinquent	
F. A claim for veterans' organization	n exemption on <i>this</i> property:	
	No 2. is new this year ☐ Yes ☐ No	
3. was not filed last year, but claim	ned on another property located at	- andal .
	2. Denial	, ,
Reason for denial (if partial denial, i	identify specific area to be denied)	
Date	Inspection for	
	Bv	. Designee

