EF-269-FIR-R02-0308-29000741-1 BOE-269-FIR REV. 02 (03-08)

REGULAR ASSESSMENT

SUPPLEMENTAL ASSESSMENT

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



## Rolf D. Kleinhans Nevada County Assessor

950 Maidu Avenue P.O. Box 599002 Nevada City, CA 95959-7902 Telephone (530) 265-1232 Fax (530) 265-9858 assessor@nevadacountyca.gov

Info	rmation for Property No Year:	
Na	ne of organization	
Ad	dress of <i>this</i> property	
	Owner only $\Box$ Operator only $\Box$ Owner-Operator Date of last inspection of property	
If c	aimant is owner, name of operator is	
lf c	aimant is operator, name of owner is	
A.	Claimant is primarily:	
	(check only one)   1. charitable   2. other (explain)	
В.	Use of property	
	1. The <b>primary activity</b> the property is used for is: (check only one)	
	a. administration	ospital)
	☐ b. commercial ☐ f. fund raising ☐ j. recreational	
	□ c. educational    □ g. hospital    □ k. rehabilitation      □ d. farming    □ h. housing    □ l. informational	
	m. other (explain)	
	b. Other (explain)	
	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	
	house personnel whose presence is not institutionally necessary	
	C. Operation of property for benefit of persons	□ v □ N-
	In your opinion are services and expenses excessive?  If anywar is year explain:	☐ Yes ☐ No
	If answer is <b>yes</b> , explain:	☐ Yes ☐ No
	If answer is <b>yes</b> , explain:	_ 100 _ 110
	In your opinion is the claimant's proposed new capital investment, if any, necessary?	☐ Yes ☐ No
	If answer is <b>no</b> , explain:	
D.	Ownership of real property (as of applicable lien date) is recorded in exact name of claimant	☐ Yes ☐ No
	If answer is <b>no</b> , explain:	
F	Did owner file an exemption claim Supplemental Assessment (in claimant's name):	? ∐ Yes ∐ No
	Date of change in ownership Recorded	☐ Yes ☐ No
	Ownership in name of claimant? —	
	Date of completion of new construction	
	Explain what was constructed —	
	3. Date put to exempt use If only a portion of the	
	exempt use, describe exempt and nonexempt portions in detail	
	Notice: date mailed      Date claim for exemption from Supplemental Assessment was filed with Assessor	
	Date first installment of supplemental tax bill becomes (became) delinquent	
F.	A claim for veterans' organization exemption on <i>this</i> 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	
_		zip code)
G.	Recommendation: 1. Approval 2. Denial	(all)
	Reason for denial (if partial denial, identify specific area to be denied)	
	Data Inspection for	
	Date Inspection for	, Assessor

