EXEMPTION OF LOW-INCOME TRIBAL HOUSING

State of California, County of



Richard Ford County Assessor-Recorder Lake County Courthouse 255 North Forbes Street Lakeport, CA 95453 Assessor's Office Phone: 707-263-2302 Recorder's Office Phone: 707-263-2293 Fax: 707-263-3703

	(name of person making claim)				
	o is filing this claim as, or on behalf of, the rein, states:	(tribe or tribally designated housing, owner and/or entity)	of the property described		
1.	That as				
		(officer)			
2.	of the				
	(name of tribe or tribally designated housing entity)				
3.	the mailing address of which is	(give complete mailing address)	ZIP		
4.	the location of the property for which exemption	is claimed is			
			ZIP		
	(give o	complete address)			
5.	That this claim for exemption is made for the 20	- 20 fiscal year on the leased propert	y described above.		
6.	in section 50079.5 of the Health and Safety Coc charged do not exceed the limits provided in sec assistance agreements. An affidavit by the claima	Least 30% of the housing are used for rental housing and related facilities for tenants who are persons of low income as defined ion 50079.5 of the Health and Safety Code or applicable federal, state, or local financial assistance agreements and the rents d do not exceed the limits provided in section 50053 of the Health and Safety Code or applicable federal, state, or local financial ince agreements. An affidavit by the claimant affirming that the tenants' incomes and rents do not exceed those limits is attached. Temption cannot be allowed without the income affidavit.			
7.	That the property is owned and operated by an	owner operator owner/ope	vner operator owner/operator		
	[] a federally recognized tribe (documentation required for first time filers)				
	[] a tribally designated housing entity (documentation required for first time filers) which is nonprofit and no part of those net earning inure to the benefit of any private shareholder.				
8.	That there is a deed restriction, agreement, or occupied by or held for occupancy by qualifying		ally binding document requiring that at least 30% of the housing units are ne tenants.		
9.	BOE-237-A, Supplemental Affidavit for BOE-237, Housing — Lower-Income Households, is also required to be filed with the Assess under the provisions of sections 251 and 254 of the Revenue and Taxation Code for those tribes or tribally designated housing entitie filing BOE-237, Exemption of Low-Income Tribal Housing.				
	FOR ASSESSOR'S USE ONLY		Whom should we contact during normal business hours for additional information?		
	Received by(Assessor's designee)	NAME			
	Of(county or city)	ADDRESS (street, city, state, zip code)	ADDRESS (street, city, state, zip code)		
0	DN(date)				
		DAYTIME PHONE NUMBER EMAIL A	ADDRESS		
		ler the laws of the State of California that the foregournents, is true, correct and complete to the bes			
SIGNATURE OF PERSON MAKING CLAIM		TITLE	DATE		

