EF-237-R04-0518-08000684-1 BOE-237 REV. 04 (05-18)

SIGNATURE OF PERSON MAKING CLAIM

EXEMPTION OF LOW-INCOME TRIBAL HOUSING

To receive the full exemption, this claim must be filed with the Assessor by February 15.



Jennifer Perry, Assessor County of Del Norte 981 H Street, Suite 120 Crescent City, CA 95531 Telephone: (707) 464-7200

DATE

who is filing this claim as, or on behalf of, the	State of California, County of	
herein, states: (influer/ 1. That as (influer/ 2. of the	(name of person making claim)	,
(officer) (officer) (name of trible or tribality designated housing entity) (give complete mailing address) (give complete mailing address) (give complete mailing address) (give complete mailing address) (give complete address) (giv		e or tribally designated housing, owner and/or entity)
2. of the	1. That as	
(name of thilde or thibdly designated housing entity) ZIP 3. the mailing address of which is		(officer)
	2. of the	ne of tribe or tribally designated housing entity)
	3. the mailing address of which is	(give complete mailing address) ZIP
(give complete address) 5. That this claim for exemption is made for the 20 20 fiscal year on the leased property described above. 6. That at least 30% of the housing are used for rental housing and related facilities for tenants who are persons of low income as definin section 50079.5 of the Health and Safety Code or applicable federal, state, or local financial assistance agreements and the recharged do not exceed the limits provided in section 50053 of the Health and Safety Code or applicable federal, state, or local financial assistance agreements and the provided in section 50053 of the Health and Safety Code or applicable federal, state, or local financial assistance agreements. An affidavit by the claimant affirming that the tenants' incomes and rents do not exceed those limits is attached the exemption cannot be allowed without the income affidavit. 7. That the property is owned and operated by an owner operator owner/operator owner/operator on the least 100 exercises and no part of those net earning increase to the benefit of any private shareholder. 8. That there is a deed restriction, agreement, or other legally binding document requiring that at least 30% of the housing units a occupied by or held for occupancy by qualifying low-income 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 entitifiling BOE-237, Exemption of Low-Income Tribal Housing. Whom should we contact during normal business hours for additional information? (det	4. the location of the property for which exemption is claim	ied is
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of	FOR ASSESSOR'S USE ONLY	
(county or city) On(date)	Received by	NAME
(date)	of(county or city)	ADDRESS (street, city, state, zip code)
() DAY HIME PHONE NUMBER EMAIL ADDRESS	on(date)	
CERTIFICATION		
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon,		

THIS EXEMPTION CLAIM IS A PUBLIC RECORD AND IS SUBJECT TO PUBLIC INSPECTION.

TITLE