EXEMPTION OF LOW-INCOME TRIBAL HOUSING

Office of Tom J. Bordonaro, Jr. San Luis Obispo County Assessor

County Government Center 1055 Monterey Street, Suite D360 San Luis Obispo, CA 93408 Telephone (805) 781-5643 Fax: (805) 781-5641

State of California, County of		Fax: (805) 781-5643 Email: Assessor@co.slo.ca.us	
	vvec	o Site: slocounty.ca.gov/assessor	
(name of person making claim)	 ,		
who is filing this claim as, or on behalf of, the		of the property described	
herein, states: (tribe of	or tribally designated housing, owner and/or entity)		
1. That as			
	(officer)		
0 -64-	(omosi)		
2. of the	e of tribe or tribally designated housing entity)		
3. the mailing address of which is		ZIP	
•	(give complete mailing address)		
4. the location of the property for which exemption is claime	d is		
		ZIP	
(give complete addr	ress)	ZIP	
5. That this claim for exemption is made for the 20 2			
6. That at least 30% of the housing are used for rental housing in section 50079.5 of the Health and Safety Code or application charged do not exceed the limits provided in section 5005 assistance agreements. An affidavit by the claimant affirming The exemption cannot be allowed without the income affirmation.	licable federal, state, or local finan 3 of the Health and Safety Code or ing that the tenants' incomes and re	cial assistance agreements and the rents applicable federal, state, or local financial	
7. That the property is owned and operated by an owned over one of the income and operated over owned and operated by an owned over owned over owned over owned owned over owned own		ner/operator	
a federally recognized tribe (documentation required	for first time filers)		
[] a tribally designated housing entity (documentation re	,	nonprofit and no part of those net earnings	
inure to the benefit of any private shareholder.			
8. That there is a deed restriction, agreement, or other leg occupied by or held for occupancy by qualifying low-incor		nat at least 30% of the housing units are	
9. BOE-237-A, Supplemental Affidavit for BOE-237, Housing under the provisions of sections 251 and 254 of the Reversiling BOE-237, Exemption of Low-Income Tribal Housing	nue and Taxation Code for those tri		
FOR ASSESSOR'S USE ONLY		contact during normal business	
	hours for	additional information?	
Received by	NAME		
, , , , , ,	10 101		
of(county or city)	ADDRESS (street, city, state, zip code)	ADDRESS (street, city, state, zip code)	
(county of only)			
on			
(usity)	DAYTIME PHONE NUMBER	EMAIL ADDRESS	
	()		
	CERTIFICATION		
I certify (or declare) under penalty of perjury under the law including any accompanying statements or documents			
SIGNATURE OF PERSON MAKING CLAIM	TITLE	DATE	

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

