EF-237-R04-0518-42000341-1 BOE-237 REV. 04 (05-18)

EXEMPTION OF LOW-INCOME TRIBAL HOUSING

Joseph E. Holland County Clerk, Recorder and Assessor

P.O. Box 159, Santa Barbara, CA 93102-0159 COUNTY Santa Barbara (805) 568-2550 Santa Maria (805) 346-8310

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

State of California, County of					
	,				
(name of person making claim)	,				
who is filing this claim as, or on behalf of, the	be or tribally des	ignated housing, owner and/or entity)	of	the property described	
1. That as					
		(officer)			
2. of the	ame of tribe or tri	bally designated housing entity)			
				710	
3. the mailing address of which is	(give com	plete mailing address)		ZIP	
4. the location of the property for which exemption is claim	ned is				
(give complete a	address)			_ ZIP	
5. That this claim for exemption is made for the 20	-	fiscal year on the leased p	roperty descri	bed above.	
6. That at least 30% of the housing are used for rental hou in section 50079.5 of the Health and Safety Code or a charged do not exceed the limits provided in section 500 assistance agreements. An affidavit by the claimant affir The exemption cannot be allowed without the income a	using and repplicable fe 053 of the I	elated facilities for tenants vederal, state, or local finan Health and Safety Code or	who are person cial assistance applicable fed	ns of low income as defined agreements and the rents eral, state, or local financia	
7. That the property is owned and operated by an ov	vner	operator own	er/operator		
[] a federally recognized tribe (documentation require	ed for first	time filers)			
 a tribally designated housing entity (documentation inure to the benefit of any private shareholder. 	required fo	or first time filers) which is r	nonprofit and n	o part of those net earnings	
8. That there is a deed restriction, agreement, or other I occupied by or held for occupancy by qualifying low-inc			nat at least 30	% of the housing units are	
9. BOE-237-A, Supplemental Affidavit for BOE-237, House under the provisions of sections 251 and 254 of the Refiling BOE-237, Exemption of Low-Income Tribal House	venue and				
FOR ASSESSOR'S USE ONLY		Whom should we contact during normal business hours for additional information?			
Received by	<u> </u>	NAME			
Of(county or city)	7	ADDRESS (street, city, state, zip code)			
on	-				
	Ī	DAYTIME PHONE NUMBER	EMAIL ADDRESS		
		<i>)</i>			
	CERTIFI	CATION			
I certify (or declare) under penalty of perjury under the including any accompanying statements or documents.					
SIGNATURE OF PERSON MAKING CLAIM		TITLE		DATE	
<u>r</u>		1		<u> </u>	

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

