EF-237-R03-0208-54000894-1 BOE-237 REV. 03 (02-08)



Tara K. Freitas County Assessor/Clerk-Recorder

221 S. Mooney Blvd., Room 102-E Visalia, CA 93291-4593

E	XEMPTION OF LOW-INCOME TRIBAL HOUSING	CALI PORTS	Ph: (559) 636-5100		
St	ate of California, County of	Fax: (559) 737-4468			
_	(name of person making claim)	,			
	no is filing this claim as, or on behalf of, the	y designated housing, owner and/or en	of the property described		
1.	That as				
		(officer)	_		
2.	of the	e or tribally designated housing entity)			
3.	the mailing address of which is	e complete mailing address)	ZIP		
	the location of the property for which exemption is claimed is				
••	the recursive and property for miletroxemption to diameter to				
	(give complete address)		ZIP		
_	(give confinete address)				
5.	That this claim for exemption is made for the 20 20	fiscal year on the leas	ed property described above.		
6.	That at least 30% of the housing are used for rental housing an in section 50079.5 of the Health and Safety Code or applicable charged do not exceed the limits provided in section 50053 of the assistance agreements. An affidavit by the claimant affirming the The exemption cannot be allowed without the income affidavit	le federal, state, or local f the Health and Safety Cod at the tenants' incomes ar	inancial assistance agreements and the rents e or applicable federal, state, or local financial		
7.	That the property is owned and operated by an owner	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 earnings inure 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 ar occupied by or held for occupancy by qualifying low-income tenants.				
9.		E-237-A, Supplemental Affidavit for BOE-237, Housing — Lower-Income Households, is also required to be filed with the Assessor er the provisions of sections 251 and 254 of the Revenue and Taxation Code for those tribes or tribally designated housing entities BOE-237, Exemption of Low-Income Tribal Housing.			
	FOR ASSESSOR'S USE ONLY	l .	we contact during normal business for additional information?		

Received by _ (Assessor's designee) (county or city) (date)

NAME ADDRESS (street, city, state, zip code) DAYTIME PHONE NUMBER EMAIL ADDRESS

CERTIFICATION

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true, correct and complete to the best of my knowledge and belief.

SIGNATURE OF PERSON MAKING CLAIM TITLE DATE	molecumy any accompanying diatements of accuments, is true,	correct and complete to the best of my i	anomougo una sonon.
	SIGNATURE OF PERSON MAKING CLAIM	TITLE	DATE

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

