## **EXEMPTION OF LOW-INCOME TRIBAL HOUSING**

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



## Tom J. Slavich **San Benito County Assessor**

440 Fifth St. Rm. 108 Hollister, CA 95023-3893 Tel: 831-636-4030 Fax: 831-636-4033

www.cosb.us/government/assessor

State	of California, County of			.,		
who is	(name of person making claim) filing this claim as, or on behalf of, the	,		of	the property described	
	, states:	(tribe or tribally des	ignated housing, owner and/or entity)	01	the property described	
1. Tha	at as					
			(officer)			
2. of the	of the					
3. the	mailing address of which is	(give com	nplete mailing address)		ZIP	
4. the	location of the property for which exemption is	claimed is			ZIP	
5. Tha	at this claim for exemption is made for the 20	20	fiscal year on the leased p	property descri	bed above.	
in s cha ass	5. That at least 30% of the housing are used for rental housing and related facilities for tenants who are persons of low income as defined in section 50079.5 of the Health and Safety Code or applicable federal, state, or local financial assistance agreements and the rents charged do not exceed the limits 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. Tha	at the property is owned and operated by an	owner	operator owr	ner/operator		
[ ]	] a federally recognized tribe (documentation required for first time filers)					
[ ]	<ul> <li>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.</li> </ul>					
	hat there is a deed res <mark>triction, agreement, or other le</mark> gally binding document requiring that at least 30% of the housing units are ccupied by or held for occupancy by qualifying low-income tenants.					
und	BOE-237-A, Supplemental Affidavit for BOE-237, Housing — Lower-Income Households, is also required to be filed with the Assesso under the provisions of sections 251 and 254 of the Revenue and Taxation Code for those tribes or tribally designated housing entities filing BOE-237, Exemption of Low-Income Tribal Housing.					
	FOR ASSESSOR'S USE ONLY			contact durin additional inf	g normal business formation?	
Rec	eived by(Assessor's designee)		NAME			
of _	(county or city)		ADDRESS (street, city, state, zip code)			
on _	(date)					
	()	i	DAYTIME PHONE NUMBER	EMAIL ADDRESS		
			( )			
		CERTIFI	CATION			
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.						
SIGNATU	IRE OF PERSON MAKING CLAIM		TITLE		DATE	

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

