EF-237-R04-0518-39000232-1 BOE-237 REV. 04 (05-18)

State of California, County of ___

EXEMPTION OF LOW-INCOME TRIBAL HOUSING

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



Steve J. Bestolarides

Assessor-Recorder-County Clerk

San Joaquin County 44 N San Joaquin Street Suite 230 Stockton, CA 95202-3273 Telephone (209) 468-2658 www.sjgov.org/assessor_recorder

(name of person making claim)				
who is filing this claim as, or on behalf of, the herein, states:	(tribe or tribally desi	gnated housing, owner and,	/or entity)	the property described
1. That as				
		(officer)		
2. of the				
(name of tribe or tribally designated housing entity)				
 the mailing address of which is the location of the property for which exemption i 		olete mailing address)	C	ZIP
	omplete address)		\mathbf{S}	ZIP
5. That this claim for exemption is made for the 20_	- 20	iscal year on the le	eased property descri	bed above.
6. That at least 30% of the housing are used for rent in section 50079.5 of the Health and Safety Cod charged do not exceed the limits provided in sect assistance agreements. An affidavit by the claima The exemption cannot be allowed without the incoment.	e or applicable fe ion 50053 of the H n <mark>t affirming that t</mark> h	dera <mark>l,</mark> state, or loc leal <mark>th and Safe</mark> ty (a <mark>l fi</mark> nancial as <mark>sis</mark> tance Code or appli <mark>cable fec</mark>	e agreements and the rents leral, 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 f	ime filers) 🚽		
 a tribally designated housing entity (document inure to the benefit of any private sharehold That there is a deed restriction, agreement, or of 	er.			
occupied by or held for occupancy by qualifying I	ow-income tenan	ts.		
9. BOE-237-A, Supplemental Affidavit for BOE-237, under the provisions of sections 251 and 254 of t filing BOE-237, Exemption of Low-Income Tribal	he Revenue and	Taxation Code for t	those tribes or tribally	designated housing entities
FOR ASSESSOR'S USE ONLY			uld we contact durin urs fo <mark>r</mark> additional inf	
Received by		IAME		
of (county or city)	Ā	DDRESS (street, city, state	, zip code)	
on				
		AYTIME PHONE NUMBER	EMAIL ADDRESS	
		7		
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

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

