EF-237-R04-0518-54000187-1 BOE-237 REV. 04 (05-18)

EXEMPTION OF LOW-INCOME TRIBAL HOUSING

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

Tara K. Freitas County Assessor/Clerk-Recorder 221 S. Mooney Blvd., Room 102-E Visalia, CA 93291-4593 Ph: (559) 636-5100 Fax: (559) 737-4468

State of California, County of	_	
(name of person making claim)	,	
who is filing this claim as, or on behalf of, the	ally designated housing, owner and/or entity)	of the property described
1. That as		
	(officer)	
2. of the		
(name of trib	be or tribally designated housing entity)	
3. the mailing address of which is	ive complete mailing address)	ZIP
4. the location of the property for which exemption is claimed is		ZIP
5. That this claim for exemption is made for the 20 - 20	fiscal year on the leased p	property described above.
 That at least 30% of the housing are used for rental housing a in section 50079.5 of the Health and Safety Code or applicat charged do not exceed the limits provided in section 50053 of assistance agreements. An affidavit by the claimant affirming t The exemption cannot be allowed without the income affidav 	ind related facilities for tenants ble federal, state, or local finan the Health and Safety Code or hat the tenants' incomes and re	who are persons of low income as defined cial assistance agreements and the rents applicable federal, state, or local financial
7. That the property is owned and operated by an owner	operator owr	er/operator
[] a federally recognized tribe (documentation required for	first time filers)	
 a tribally designated housing entity (documentation require inure to the benefit of any private shareholder. 	red for first time filers) which is	nonprofit and no part of those net earnings
8. That there is a deed restriction, agreement, or other legally occupied by or held for occupancy by qualifying low-income t		hat 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 Revenue filing BOE-237, Exemption of Low-Income Tribal Housing.		
FOR ASSESSOR'S USE ONLY		contact during normal business
Received by		additional information?
(Assessor's designee)	NAME	
of (county or city)	ADDRESS (street, city, state, zip code)	
on		
(oate)	DAYTIME PHONE NUMBER	EMAIL ADDRESS
	()	
CEF	RTIFICATION	
I certify (or declare) under penalty of perjury under the laws of including any accompanying statements or documents, is	of the State of California that th	
SIGNATURE OF PERSON MAKING CLAIM	TITLE	DATE

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