EF-237-R03-0208-55000202-1 BOE-237 REV. 03 (02-08)

State of California, County of

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

To Tour Power Property of the Property of the

## Kaenan Whitman Tuolumne County Assessor - Recorder

2 South Green Street, Third Floor

Sonora, CA 95370 Phone: (209) 533-5535 Fax: (209) 533-5674

Email: assessor@tuolumnecounty.ca.gov

|  | ,   |
|--|---|
| (name of person making claim)  | •   |
| who is filing this claim as, or on behalf of, the  | ribally designated housing, owner and/or entity) of the property described  |
| I. That as   |   |
|  | (officer)   |
| 2. of the  | tribe or tribally designated housing entity)  |
|  |   |
| 3. the mailing address of which is  4. the location of the property for which exemption is claimed   | ZIP   |
| 5. That this claim for exemption is made for the 20 20_  |   |
| <ol> <li>That at least 30% of the housing are used for rental housing<br/>in section 50079.5 of the Health and Safety Code or applic<br/>charged do not exceed the limits provided in section 50053</li> </ol> | and related facilities for tenants who are persons of low income as define able federal, state, or local financial assistance agreements and the rent of the Health and Safety Code or applicable federal, state, or local financial that the tenants' incomes and rents do not exceed those limits is attached |
| 7. That the property is owned and operated by an owner   | operator owner/operator   |
| [ ] a federally recognized tribe (documentation required for   | or first time filers)   |
| [ ] a tribally designated housing entity (documentation require to the benefit of any private shareholder.   | uired fo <mark>r first time filers) w</mark> hich is non <mark>pr</mark> ofit and no part of those net earning  |
| <ol> <li>That there is a deed restriction, agreement, or other legal<br/>occupied by or held for occupancy by qualifying low-income</li> </ol>   | ly bin <mark>ding docume</mark> nt requiring that at least 30% of the housing units are tenants.  |
|  | <ul> <li>Lower-Income Households, is also required to be filed with the Assessore and Taxation Code for those tribes or tribally designated housing entities</li> </ul>   |
| FOR ASSESSOR'S USE ONLY  | Whom should we contact during normal business   |
| Received by  | hours for additional information?   |
| of(county or city)   | ADDRESS (street, city, state, zip code)   |
| on   | _   |
| (date)   | DAYTIME PHONE NUMBER EMAIL ADDRESS  |
|  | ( )   |
| CF   | ERTIFICATION  |
| I certify (or declare) under penalty of perjury under the laws   | s of the State of California that the foregoing and all information hereon, 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.

