EF-237-R04-0518-27000210-1
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.



Xochitl Marina Camacho Monterey County Assessor

DATE

P. O. Box 570 Salinas, CA 93902-0570 Phone: (831) 755-5035 Fax: (831) 755-5435 assessor@co.monterey.ca.us

who is filing this claim as, or on behalf of, the	
(officer)         2. of the	
2. of the	
(name of tribe or tribally designated housing entity) 3. the mailing address of which is ZIP	
<ul> <li>4. the location of the property for which exemption is claimed is</li> <li>ZIP</li></ul>	
<ul> <li>4. the location of the property for which exemption is claimed is</li> <li>ZIP</li></ul>	
<ul> <li><i>(give complete address)</i></li> <li>5. That this claim for exemption is made for the 20 20 fiscal year on the leased property described above.</li> <li>6. That at least 30% of the housing are used for rental housing and related facilities for tenants who are persons of low incomplete the second sec</li></ul>	
(give complete address) 5. That this claim for exemption is made for the 20 20 fiscal year on the leased property described above. 6. That at least 30% of the housing are used for rental housing and related facilities for tenants who are persons of low inco	
<ul> <li>5. That this claim for exemption is made for the 20 - 20 fiscal year on the leased property described above.</li> <li>6. That at least 30% of the housing are used for rental housing and related facilities for tenants who are persons of low incomposition.</li> </ul>	
6. That at least 30% of the housing are used for rental housing and related facilities for tenants who are persons of low inco	
charged do not exceed the limits provided in section 50053 of the Health and Safety Code or applicable federal, state, o assistance agreements. An affidavit by the claimant affirming that the tenants' incomes and rents do not exceed those lin The exemption cannot be allowed without the income affidavit.	s and the rents or local financia
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 the inure to the benefit of any private shareholder.	se net earnings
<ol> <li>That there is a deed restriction, agreement, or other legally binding document requiring that at least 30% of the hol occupied by or held for occupancy by qualifying low-income tenants.</li> </ol>	using units are
<ol> <li>BOE-237-A, Supplemental Affidavit for BOE-237, Housing — Lower-Income Households, is also required to be filed wit under the provisions of sections 251 and 254 of the Revenue and Taxation Code for those tribes or tribally designated h filing BOE-237, Exemption of Low-Income Tribal Housing.</li> </ol>	
FOR ASSESSOR'S USE ONLY Whom should we contact during normal but hours for additional information?	ısiness
Received by	
Of ADDRESS (street, city, state, zip code)	
ON(date)	
DAYTIME PHONE NUMBER EMAIL ADDRESS	
CERTIFICATION	

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

TITLE



SIGNATURE OF PERSON MAKING CLAIM