

Rolf D. Kleinhans Nevada County Assessor 950 Maidu Avenue P.O. Box 599002 Nevada City, CA 95959-7902 Telephone (530) 265-1232 Fax (530) 265-9858 assessor@nevadacountyca.gov

EXEMPTION OF LEASED PROPERT	Y USED
EXCLUSIVELY FOR LOW-INCOME H	IOUSING

This claim is filed for fiscal year 20 \_\_\_\_\_- 20 \_\_\_\_. (Example: a person filing a timely claim in January 2011 would enter "2011-2012.")

	FOR ASSESSO	R'S USE ONLY
	ived by	
- 4	Received by	
of	(county or city)	. on
	(county of city)	(date)
	CITY, STATE, ZIP CODE	
city)		ASSESSOR'S PARCEL NUMBER
e lease	transferred to the lessee	with a remaining term of 35 years or
by section	on 50093 of the Health an	
Code in determ rminatio endorse not be a	order for this exemption of ination that it is a charitab on letter, the limited partne ement by the Secretary of allowed without these doc	ole organization under section 501(c) ership agreement, and the Certificate State uments.
ess ho	urs for additional info	
		TITLE
ION		
		all information hereon, including any owledge and belief.
	TITLE	1
	DATE	
	lities for by section by section section by section by section by section by section by section section by section	city) e lease transferred to the lessee lities for tenants who are persons by section 50093 of the Health an ovided by the lessee (if this claim n. Note: if this box is checked, th Code in order for this exemption of determination that it is a charitate rmination letter, the limited partne endorsement by the Secretary of not be allowed without these doc ess hours for additional info lifornia that the foregoing and a the complete to the best of my know TITLE

## THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

