		Alyssa Douglass
37-R04-0518-04000221-1 BOE-237 REV. 04 (05-18)		Butte County Assessor
		25 County Center Dr Suite 100 Oroville, CA 95965-3382
To receive the full exemption, this claim must be filed with the Assessor by Feb	Butte County	(530)538-7721
· · · · · · · · · · · · · · · · · · ·	•CALIFORNIA•	Fax (530) 538-7991 Email: assessorsoffice@buttecounty.net
State of California, County of		Website: www.buttecounty.net/assessor
(name of person making claim)	-1	
who is filing this claim as, or on behalf of, the	designated housing, owner and/or	of the property described
1. That as		
	(officer)	
2. of the	or tribally designated housing entity;	1
3. the mailing address of which is		ZIP
(give a	complete mailing address)	
4. the location of the prop <mark>ert</mark> y for wh <mark>ich exemptio</mark> n is <mark>cl</mark> aimed is		
		715
(give complete address)		ZIP
5. That this claim for exemption is made for the 20 20	fiscal year on the lea	sed property described above.
6. That at least 30% of the housing are used for rental housing and	related facilities for ten	ants who are persons of low income as define
in section 50079.5 of the Health and Safety Code or applicable	federal, state, or local	financial assistance agreements and the rer
charged do not exceed the limits provided in section 50053 of th		
assistance agreements. An affidavit by the claimant affirming tha	it the tenants' incomes a	nd rents do not exceed those limits is attache
The exemption cannot be allowed without the income affidavit.		
7. That the property is owned and operated by an 🗌 owner	operator	owner/operator
[ ] a federally recognized tribe (documentation required for first	st time filers)	
[ ] a tribally designated housing entity (documentation required inure to the benefit of any private shareholder.	d for first time filers) whic	ch is nonprofit and no part of those net earning
<ol> <li>That there is a deed restriction, agreement, or other legally bi occupied by or held for occupancy by qualifying low-income ten</li> </ol>		ing that at least 30% of the housing units ar
9. BOE-237-A, Supplemental Affidavit for BOE-237, Housing — Lo	ower-Income Household	ds, is also required to be filed with the Assess
under the provisions of sections 251 and 254 of the Revenue an	nd Taxation Code for the	ose tribes or tribally designated housing entitie
filing BOE-237, Exemption of Low-Income Tribal Housing.		
FOR ASSESSOR'S USE ONLY		d we contact during normal business
	nour	s fo <mark>r</mark> additional information?
Received by(Assessor's designee)	NAME	
of	ADDRESS (street, city, state, zi	o code)
ON(date)		
	DAYTIME PHONE NUMBER	EMAIL ADDRESS
	( )	
CERTI	FICATION	
		hat the foregoing and all information hereon
CERTI I certify (or declare) under penalty of perjury under the laws of to including any accompanying statements or documents, is true	the State of California th	
I certify (or declare) under penalty of perjury under the laws of t	the State of California th	

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

