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

Claude Parrish
Orange County Assessor
Civic Center Plaza, Building 11
625 N. Ross Street, Room 142
www.ocgov.com/assessor

State of California, County of	www.ocgov.com/assessor
	,
who is filing this claim as, or on behalf of, the	of the property described
1. That as	
	(officer)
2. of the	ribe or tribally designated housing entity)
<ul> <li>3. the mailing address of which is</li></ul>	give complete mailing address)
(give complete address)	ZIP
in section 50079.5 of the Health and Safety Code or application charged do not exceed the limits provided in section 50053 of	and related facilities for tenants who are persons of low income as defined ble federal, state, or local financial assistance agreements and the rents f the Health and Safety Code or applicable federal, state, or local financia that the tenants' incomes and rents do not exceed those limits is attached
inure to the benefit of any private shareholder.	ired for first time filers) which is nonprofit and no part of those net earnings by binding document requiring that at least 30% of the housing units are
under the provisions of sections 251 and 254 of the Revenue filing BOE-237, Exemption of Low-Income Tribal Housing.	Lower-Income Households, is also required to be filed with the Assessor and Taxation Code for those tribes or tribally designated housing entities
Received by	Whom should we contact during normal business hours for additional information?
of(county or city)	ADDRESS (street, city, state, zip code)
on(date)	DAYTIME PHONE NUMBER EMAIL ADDRESS
CFF	RTIFICATION
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, 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.

