EF-237-R04-0518-33000267-1	
BOE-237 REV. 04 (05-18)	

EXEMPTION OF LOW-INCOME TRIBAL HOUSING

State of California, County of _____

To receive the full exemption, this claim must be filed with the Assessor by February 15.



Peter Aldana Assessor-County Clerk-Recorder County of Riverside

PO Box 751 Riverside, CA 92502-0751 Phone: (951) 955-6200 https://www.asrclkrec.com/

(name of person making claim)	,	
who is filing this claim as, or on behalf of, the herein, states:	(tribe or tribally designated housing, owner and/or entity)	of the property described
1. That as		
	(officer)	
2. of the	(name of tribe or tribally designated housing entity)	
3. the mailing address of which is		
4. the location of the property for which exemption	(give complete mailing address) is claimed is complete address)	ZIP
5. That this claim for exemption is made for the 20	20 fiscal year on the leased propert	ty described above.
charged do not exceed the limits provided in sec	de o <mark>r applicable federal, state, or local financial as</mark> ction 50053 of the Health and Safety Code or applic ant affirming that the tenants' income <mark>s</mark> and rents do	s <mark>sis</mark> tance agreements and the rents cable federal, state, or local financia
7. That the property is owned and operated by an	owner operator owner/ope	erator
[] a federally recognized tribe (documentation	required for first time filers)	
inure to the benefit of any private sharehold		
That there is a deed restriction, agreement, or occupied by or held for occupancy by qualifying		least 30% of the housing units are
 BOE-237-A, Supplemental Affidavit for BOE-23 under the provisions of sections 251 and 254 of filing BOE-237, Exemption of Low-Income Triba 	the Revenue and Taxation Code for those tribes or	
FOR ASSESSOR'S USE ONLY		ct during normal business ional information?
Received by(Assessor's designee)	NAME	
of (county or city)	ADDRESS (street, city, state, zip code)	
ON(date)		
(oate)	DAYTIME PHONE NUMBER EMAILA	ADDRESS
	()	
	CERTIFICATION	
	der the laws of the State of California that the foregoing the state of california that the foregoing the state of the best locuments, is true, correct and complete to the best locuments.	
SIGNATURE OF PERSON MAKING CLAIM		

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

