EXEMPTION OF LOW-INCOME TRIBAL HOUSING

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



Kathy Scriven Sutter County Assessor

1160 Civic Center Blvd., Suite D Yuba City, CA 95993 Phone Number: (530) 822-7160 Fax Number: (530) 822-7198 Fmail: assessor@co.sutter.ca.us

State of California, County of	
who is filing this claim as, or on behalf of, the	of the property described of the property described
	(officer)
2. of the	me of tribe or tribally designated housing entity)
3. the mailing address of which is	ZIP
5. That this claim for exemption is made for the 20	- 20 fiscal year on the leased property described above.
in section 50079.5 of the Health and Safety Code or a charged do not exceed the limits provided in section 50	sing and related facilities for tenants who are persons of low income as defined oplicable federal, state, or local financial assistance agreements and the rents 053 of the Health and Safety Code or applicable federal, state, or local financial ming that the tenants' incomes and rents do not exceed those limits is attached. affidavit.
7. That the property is owned and operated by an owned operated of owned and operated by an owned operated oper	vner operator owner/operator
[] a federally recognized tribe (documentation require	ed for first time filers)
inure to the benefit of any private shareholder.	required for first time filers) which is nonprofit and no part of those net earnings egally binding document requiring that at least 30% of the housing units are come tenants.
	ing — Lower-Income Households, is also required to be filed with the Assessor venue and Taxation Code for those tribes or tribally designated housing entities ng.
FOR ASSESSOR'S USE ONLY	Whom should we contact during normal business
Received by	hours fo <mark>r</mark> additional information?
Of(county or city)	ADDRESS (street, city, state, zip code)
on(date)	
	DAYTIME PHONE NUMBER EMAIL ADDRESS
	CERTIFICATION
	laws of the State of California that the foregoing and all information hereon, nts, 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.

