

**ASSESSOR'S  
EVIDENCE**



**WASHOE COUNTY ASSESSOR**  
Chris S. Sarman

Rigo Lopez  
Chief Deputy Assessor

Steve Clement  
Chief Property Appraiser

Lora Zimmer  
Assessment Services Coordinator

**EXEMPTION CHANGE STIPULATION FOR THE BOARD OF EQUALIZATION**

January 25, 2023

DCCS RENO 713 LP  
C/O KRISTOPHER RHOADS – USA PROPERTIES FUND INC  
3200 DOUGLAS BLVD STE 200  
ROSEVILLE CA 95661

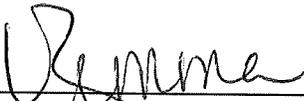
Re: Hearing Number: 23-0025E22  
Assessor Parcel Number (APN): 011-231-15  
Address: 695 S CENTER STREET

To Whom It May Concern:

The Assessment Services Division of the Washoe County Assessor’s Office has completed the review of the exemption value of the above property under appeal for the 2022/2023 fiscal year. The Assessor denied the exemption for the 2022/2023 fiscal year due to the application or renewal for exemption not being filed by the deadline of July 5, 2022. After careful consideration of the facts involved and under the authority of Nevada Revised Statute (NRS) 361.155, we are recommending that the Washoe County Board of Equalization grant the Qualified Low-Income Housing Project exemption to this property under NRS 361.082. By granting this exemption, the property’s 2022/2023 exemption taxable value will be adjusted as follows:

Roll Year: 2022/2023	FROM	TO
Land Taxable Value	\$1,680,000	\$1,680,000
Improvement Taxable Value	\$4,253,718	\$4,253,718
Exemption (minus)	\$0	(\$5,933,718)
<b>Total Taxable Value</b>	<b>\$5,933,718</b>	<b>\$0</b>

By signing below, Petitioner agrees to the above stipulation. Please return this letter to our office as soon as possible and at least seven (7) days prior to your scheduled hearing date. You may email the form to [LZimmer@washoecounty.gov](mailto:LZimmer@washoecounty.gov), mail it to the address below or fax it to (775)328-3642.

  
\_\_\_\_\_  
Lora Zimmer  
Assessment Services Coordinator

  
\_\_\_\_\_  
Rigo Lopez  
Chief Deputy Assessor

**I hereby agree to the value as stipulated above for my appeal to the Board of Equalization:**

Kristopher Rhoads  
Printed Name of Owner/Authorized Agent

  
\_\_\_\_\_  
Signature of Owner/Authorized Agent

01/26/2023  
Date