



2316 SE Willard, Milwaukie, Oregon 97222  
p: 503.654.1007 • f: 503.654.1319 • www.nwhousing.org

February 4, 2025

City of Wilsonville  
Attn: Finance Department  
29799 SW Town Center Loop East  
Wilsonville, OR 97070

Dear Katherine,

At the time of submission of our application for property tax exemption, NHA's Wilsonville properties have the following vacancy statistics:

- Autumn Park Apartments – 1 units vacant, 99% occupancy
- The Charleston Apartments – 2 units vacant, 96% occupancy
- Creekside Woods Apartments – 4 unit vacant, 95% occupancy

These units are intended to be occupied within the year. Like all other units at the properties listed above, they will be available exclusively to eligible low-income persons.

Thank you for your consideration of our application.

Kind Regards,

A handwritten signature in blue ink that reads "Trell Anderson".

Trell Anderson  
Executive Director

**APPLICATION**

**PROPERTY TAX EXEMPTION FOR LOW-INCOME HOUSING HELD BY  
CHARITABLE, NONPROFIT ORGANIZATIONS**

---

(For Office Use Only)

City of Wilsonville, Oregon \$250 Application Fee \_\_\_\_\_  
Date Received: \_\_\_\_\_ \$50 Renewal Fee \_\_\_\_\_  
Receipt No. \_\_\_\_\_

---

**CONTENTS**

	Page
Section A. Application Information	1
B. Property to be considered for exemption	2
C. Leasehold Interest in Eligible Property	2
D. Description of Charitable Purpose/Project Benefit	3
E. Declarations	4

**Section A – Applicant Information**

Corporate Name: Northwest Housing Alternatives, Inc.

Address: 2316 SE Willard Street, Milwaukie, OR 97222

---

Telephone: (503) 654-1007 \_\_\_\_\_  
                    Business Residence (Optional)

Email Address: schroeder@nwhousing.org

Chief Executive Officer: Trell Anderson

Contact Person: Zachary Schroeder Telephone: (415) 610-4507

**Section B – Property to be Considered for Exemption**

(Sections B, C, and D must be filled out for each building for which you are requesting a tax exemption)

Organization: Autumn Park Apartments

Property Address: 10920 SW Wilsonville Road, Wilsonville, OR 97070

Assessor’s Property Tax Account Number(s): 00818388

(Be sure to identify all account numbers for both land and improvements on the property for which you are requesting tax exemption, in some cases, land and improvements may have separate property tax account numbers.)

Total number of residential units in the building: 144

Number of residential units occupied by very low-income people: 144

Total square feet in building: 116,928

Total square feet used to house very low-income people<sup>1</sup> 116,928

**Section C – Leasehold Interest in Eligible Property**

Do you own the property in question?  Yes  No

If you answered “no” to the above question, do you have leasehold interest in the property?  
 Yes  No

If yes, please include a statement describing how, as the nonprofit organization, you are obligated under the terms of the lease to pay the ad valorem taxes on this property or other contractual arrangement such that the property tax exemption benefits accrue to the nonprofit agency and the residential tenants served rather than the owner or corporation from whom you lease.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<sup>1</sup> This includes halls, baths, dining, and other space dedicated to residential use. Retail uses and other accessory uses not related to residential use are not to be counted.

**Section D – Description of Charitable Purpose/Project Benefit (Use for multiple projects if same conditions apply)**

Will the cost savings resulting from the proposed tax exemption enable you to do the following?

1. Reduce the rents that your very low-income residential tenants pay on the property in question?  Yes  No If so, by approximately how much? \$90/unit/month
  
2. Provide greater services to your very low income residential tenants?  Yes  No.
  
3. If yes, in what way(s)? All cost savings are passed directly through to the tenants in the form of reduced rents
  
4. Provide any other benefit to your very low-income residential tenants?  Yes  No  
If yes, please explain: NHA Provides a robust Resident Services program that directly benefits residents

If you lease the property identified in this application, to what extent does your lease agreement coincide with the timeframe of the qualifying tax year? Please Explain:

---

---

---

---

---

---

---

---

---

---

**Section B – Property to be Considered for Exemption**

(Sections B, C, and D must be filled out for each building for which you are requesting a tax exemption)

Organization: The Charleston Apartments

Property Address: 11609 SW Toulouse Road, Wilsonville, OR 97070

Assessor’s Property Tax Account Number(s): 05021215, 05021232

(Be sure to identify all account numbers for both land and improvements on the property for which you are requesting tax exemption, in some cases, land and improvements may have separate property tax account numbers.)

Total number of residential units in the building: 52

Number of residential units occupied by very low-income people: 51

Total square feet in building: 35,493

Total square feet used to house very low-income people<sup>1</sup> 35,493

**Section C – Leasehold Interest in Eligible Property**

Do you own the property in question?  Yes  No

If you answered “no” to the above question, do you have leasehold interest in the property?  
 Yes  No

If yes, please include a statement describing how, as the nonprofit organization, you are obligated under the terms of the lease to pay the ad valorem taxes on this property or other contractual arrangement such that the property tax exemption benefits accrue to the nonprofit agency and the residential tenants served rather than the owner or corporation from whom you lease.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<sup>1</sup> This includes halls, baths, dining, and other space dedicated to residential use. Retail uses and other accessory uses not related to residential use are not to be counted.

**Section D – Description of Charitable Purpose/Project Benefit (Use for multiple projects if same conditions apply)**

Will the cost savings resulting from the proposed tax exemption enable you to do the following?

1. Reduce the rents that your very low-income residential tenants pay on the property in question?  Yes  No If so, by approximately how much? \$47/unit/month
  
2. Provide greater services to your very low income residential tenants?  Yes  No.
  
3. If yes, in what way(s)? all cost savings are passed directly through to the tenants in the form of reduced rents
  
4. Provide any other benefit to your very low-income residential tenants?  Yes  No  
If yes, please explain: NHA provides a robust Resident Services program that directly benefits residents.

If you lease the property identified in this application, to what extent does your lease agreement coincide with the timeframe of the qualifying tax year? Please Explain:

---

---

---

---

---

---

---

---

---

---

**Section B – Property to be Considered for Exemption**

(Sections B, C, and D must be filled out for each building for which you are requesting a tax exemption)

Organization: Creekside Woods Limited Partnership

Property Address: 7825 SW Wilsonville Road, Wilsonville, OR 97070

Assessor’s Property Tax Account Number(s): 05022666

(Be sure to identify all account numbers for both land and improvements on the property for which you are requesting tax exemption, in some cases, land and improvements may have separate property tax account numbers.)

Total number of residential units in the building: 84

Number of residential units occupied by very low-income people: 84

Total square feet in building: 73,042

Total square feet used to house very low-income people<sup>1</sup> 73,042

**Section C – Leasehold Interest in Eligible Property**

Do you own the property in question?  Yes  No

If you answered “no” to the above question, do you have leasehold interest in the property?  
 Yes  No

If yes, please include a statement describing how, as the nonprofit organization, you are obligated under the terms of the lease to pay the ad valorem taxes on this property or other contractual arrangement such that the property tax exemption benefits accrue to the nonprofit agency and the residential tenants served rather than the owner or corporation from whom you lease.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<sup>1</sup> This includes halls, baths, dining, and other space dedicated to residential use. Retail uses and other accessory uses not related to residential use are not to be counted.

**Section D – Description of Charitable Purpose/Project Benefit (Use for multiple projects if same conditions apply)**

Will the cost savings resulting from the proposed tax exemption enable you to do the following?

1. Reduce the rents that your very low-income residential tenants pay on the property in question?  Yes  No If so, by approximately how much? \$35/unit/month
  
2. Provide greater services to your very low income residential tenants?  Yes  No.
  
3. If yes, in what way(s)? All cost savings are passed directly through to the tenants in the form of reduced rents
  
4. Provide any other benefit to your very low-income residential tenants?  Yes  No  
If yes, please explain: NHA provides a robust Resident Services program that directly benefits the residents

If you lease the property identified in this application, to what extent does your lease agreement coincide with the timeframe of the qualifying tax year? Please Explain:

---

---

---

---

---

---

---

---

---

---



**Section E- Declarations**

Please read carefully and sign below before a notary.

1. I have attached to this application the IRS declaration of the status of application as a tax exempt corporation under 26 U.S.C. Section 501(c)(3) or (4).
2. I am aware that the income qualifying tenants must meet the income guidelines in accordance with 42 U.S.C. Section 1437 (a)(b)(2) as amended. See Attachment A, Income Eligibility Schedule). Tenant incomes do not exceed these limitations, as I verily believe.
3. I am aware of all requirements for tax exemption imposed by ORS 307.540-307.545 (Chapter 660 Oregon Laws 1985, as amended by Chapter 756 Oregon Laws 1987) and implemented by Resolution No. 1854 of the City of Wilsonville.
4. The above-described properties qualify or will qualify upon completion of any rehabilitation improvements and subsequent occupancy by very low-income residents for property tax exemption within 30 days of the April 1st application or the date of approval.

By: Trell Anderson  
Agency Chief Executive Officer (Signature)

Trell Anderson  
Agency Chief Executive officer (Print or typed)

For: Northwest Housing Alternatives, Inc.  
Corporate Name (Print or type)

State of Oregon  
County of Clackamas  
Subscribed and sworn to before me this 6th day of February, 2025 <sup>TA</sup> 2024.

Victoria Laine Butler  
Notary Public For Oregon  
My Commission Expires: August 20, 2028

