BOE-267-L2 (P1) REV 03 (05-21)

WELFARE EXEMPTION SUPPLEMENTAL AFFIDAVIT, HOUSING — LOWER INCOME HOUSEHOLDS — TENANT DATA

ELIAL COUNTY

Robert Menvielle Imperial County Assessor

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Website: assessor.imperialcounty.org

This claim is filed for fiscal year 20 — 20					
This is a Supplemental Affidavit filed with					
□ BOE-267, Claim for Welfare Exemption (First	t Filing)				
☐ BOE-267-A, Claim for Welfare Exemption (A	nnual Filing)				
n the case of a claim, for low-income rental housin iability company, that does not receive government certain limit if 90 percent or more of the occupants of by Section 50053 of the Health and Safety Code. The a taxpayer, with respect to a single property or multipust complete this affidavit if you checked box C(3) in the section 214(g)(1)(C). SECTION 1. IDENTIFICATION OF APPLICANT AND	t financing or the property total exempti ple properties in Section 3 o	receive low are lower inc ion amount a s, may not ex of form BOE-2	income housing tax of the come households whose lowed under Revenue ceed twenty million do 267-L indicating you an	credits, may qualify for se rent does not exceed and Taxation Code second collars (\$20,000,000) in a	exemption up to a the rent prescribed ction 214(g)(1)(C) to assessed value. You
Name of Organization				Corporate ID or LLC N	lumber
Address of Property (number and street)	Λ				<u> </u>
City, County, Zip Code	1	////		Assessor's Parcel/Ass	essment Number(s)
SECTION 2. HOUSEHOLD INFORMATION					
A. List of Qualified Households Section 259.14 of the Revenue and Taxation Code prov					
	d by lower inco d the actual re- reported in Se- No. of	ome ho <mark>usehol</mark> nt. Use the tal	ds for which exemption ble below to provide the	is claimed: the actual horequired information. Att Maximum Allowable Rent That Can Be	ousehold income, the ach additional sheets Actual Rent Charged to
Section 259.14 of the Revenue and Taxation Code proven reporting the following information on the units occupied maximum rent that can be charged to the household, and as necessary. Report information for each unit that was reconstructed.	d by lower inco d the actual re- reported in Se- No. of	ome househol nt. Use the tal ction 4, part B	ds for which exemption ble below to provide the of form BOE-267-L. Annual Household	is claimed: the actual horequired information. Att Maximum Allowable	ousehold income, the ach additional sheets Actual Rent
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Section 259.14 of the Revenue and Taxation Code prove reporting the following information on the units occupied maximum rent that can be charged to the household, and as necessary. Report information for each unit that was reported to the household. Address/Unit Number	d by lower inco d the actual represented in Services. No. of Ho	CERTIFICA	ds for which exemption ble below to provide the of form BOE-267-L. Annual Household Income ATION Trion Trion	is claimed: the actual horequired information. Att Maximum Allowable Rent That Can Be Charged for the Unit	Actual Rent Charged to the Tenant

INSTRUCTIONS FOR FILING WELFARE EXEMPTION SUPPLEMENTAL AFFIDAVIT, HOUSING — LOWER INCOME HOUSEHOLDS — TENANT DATA

FILING OF AFFIDAVIT

This affidavit is required under the provisions of sections 214(g)(1)(C), 214.17, and 259.14 of the Revenue and Taxation Code and must be filed when seeking exemption on low-income housing property, owned and operated by a nonprofit organization or eligible limited liability company, that <u>does not</u> receive government financing or state/federal low-income housing tax credits. A separate affidavit must be filed for each location upon which you are seeking exemption under the provisions of section 214(g)(1)(C). This affidavit supplements the claim for Welfare Exemption and must be filed, for certain properties, with the County Assessor by February 15 to avoid a late filing penalty under section 270. If you indicated on supplemental affidavit form BOE-267-L that you seek exemption under the criteria of Revenue and Taxation code section 214(g)(1)(C), by checking box (C)(3) in SECTION 3 of that form, you must complete and file this form; failure to do so will result in denial of the exemption. In accordance with Revenue and Taxation Code section 259.14, the Assessor shall keep this information confidential.

FISCAL YEAR

The fiscal year for which an exemption is sought must be entered correctly. The proper fiscal year follows the lien date (12:01 a.m., January 1) as of which the taxable or exempt status of the property is determined. For example, a person filing a timely claim in February 2018 would enter "2018-2019" on line four of the claim; a "2017-2018" entry on a claim filed in February 2018 would signify that a late claim was being filed for the preceding fiscal year.

SECTION 1. Identification of Applicant and Property

Identify the name of the organization seeking exemption on the low-income housing property, corporate identification number or LLC number assigned by the California Secretary of State. Identify the location of the low-income housing property, the county in which the property is located, and the assessor's parcel number or assessment number of the property.

SECTION 2. Household Information

Provide the requested household information on all units occupied by lower income households for which the organization is seeking exemption. This listing must include all households for which exemption is sought in Section 4 of form BOE-267-L, Welfare Exemption Supplemental Affidavit, Housing —Lower Income Households.

