BOE-267-L2 (P1) REV 02 (05-19)

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

Tara K. Freitas **County Assessor/Clerk-Recorder**

221 S. Mooney Blvd., Room 102-E Visalia, CA 93291-4593 Ph: (559) 636-5100 Fax: (559) 737-4468

This claim is filed for fiscal year 20 — 20				
This is a Supplemental Affidavit filed with				
□ BOE-267, Claim for Welfare Exemption (First Filin	g)			
BOE-267-A, Claim for Welfare Exemption (Annual	l Filing)			
In the case of a claim, for low-income rental housing proliability company, that does not receive government final certain limit if 90 percent or more of the occupants of the p by Section 50053 of the Health and Safety Code. The total a taxpayer, with respect to a single property or multiple promust complete this affidavit if you checked box C(3) in Second section 214(g)(1)(C). SECTION 1. IDENTIFICATION OF APPLICANT AND IDENTIFICATION OF ORGANIZATION OF APPLICANT AND IDENTIFICATION OF ORGANIZATION ORGANIZATI	ncing or receive low- property are lower inco- exemption amount al properties, may not exc ction 3 of form BOE-2	income housing tax come households whos lowed under Revenue seed twenty million do 67-L indicating you are	redits, may qualify for e e rent does not exceed t and Taxation Code sect ellars (\$20,000,000) in as	exemption up to a he rent prescribed ion 214(g)(1)(C) to sessed value. You der the provisions
Address of Property (number and street)				
Address of Freperty (Humber and Sirect)	A // /			
City, County, Zip Code				
SECTION 2. HOUSEHOLD INFORMATION				
A. List of Qualified Households				
Section 259.14 of the California Revenue and Taxation Code an affidavit reporting the following information on the units of income, the maximum rent that can be charged to the house additional sheets as necessary. Report information for each units of the control of the contro	ccu <mark>pie</mark> d by lowe <mark>r incom</mark> ehold, and the actual re	e households for which ent. Use the table below	n <mark>exe</mark> mption <mark>is</mark> claimed: th w to provide the required	e actual household
Address/Unit Number	No. of Persons in Household	Annual Household Income	Maximum Allowable Rent That Can Be Charged for the Unit	Actual Rent Charged to the Tenant
		<u> </u>		
	CERTIFICA	TION		
I certify (or declare) under penalty of perjury under the law any accompanying statements or docum	vs of the State of Califo	rnia that the foregoing a		
NAME OF CLAIMANT	TITLE			DATE
SIGNATURE OF CLAIMANT	DAYTIME TELEPHONE		EMAIL ADDRESS	
	\ /			

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 and county in which the property is located.

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.

