BOE-267-L2 (P1) REV. 01 (12-18)

### Jennifer Perry, Assessor County of Del Norte

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

This claim is filed for fiscal year 20 — 20						
This is a Supplemental Affidavit filed with						
BOE-267, Claim for Welfare Exemption (First Filin	ng)					
☐ BOE-267-A, Claim for Welfare Exemption (Annua	al Filing)					
In the case of a claim, for low-income rental housing poliability company, that does not receive government final certain limit if 90 percent or more of the occupants of the poly Section 50053 of the Health and Safety Code. The totato a taxpayer, with respect to a single property or multip You must complete this affidavit if you checked box Coprovisions of section 214(g)(1)(C).	ancing o property al exemp le prope	r receive low- are lower inception amount erties, may no	income housing tax of ome households whos allowed under Revenu t exceed twenty millio	redit e rer ie an n do	is, may qualify for nt does not exceed nd Taxation Code s llars (\$20,000,000)	the rent prescribed section 214(g)(1)(C) in assessed value.
SECTION 1. IDENTIFICATION OF APPLICANT AND IDE	ENTIFIC	ATION OF PR	ROPERTY			
Name of Organization				Со	rporate ID or LLC N	lumber
Address of Property (number and street)						
City, County, Zip Code						
Section 259.14 of the California Revenue and Taxation Code affidavit reporting the following information on the units occincome, the maximum rent that can be charged to the hous additional sheets as necessary. Report information for each to Address/Unit Number	cupied by sehold, and unit that well	y lower income nd the actual r	e households for which rent. Use the table below	exer w to m BC	nption is claimed: t provide the require	the actual household
I certify (or declare) under penalty of perjury under the la any accompanying statements or docun	ws of the nents, is	CERTIFICA State of Califo true, correct, a	ornia that the foregoing a	and a	Il information conta y knowledge and be	ined herein, including elief.
NAME OF CLAIMANT		TITL			-	DATE
SIGNATURE OF CLAIMANT		DAYTIME TELEP	HONE		EMAIL ADDRESS	

THIS DOCUMENT IS CONFIDENTIAL AND IS NOT SUBJECT TO PUBLIC DISCLOSURE



# 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.* 

