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

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

# Sendy Perez Glenn County Assessor/Clerk/Recorder

516 W. SYCAMORE ST., 2ND FLOOR WILLOWS, CA 95988 Phone: (530) 934-6402 FAX: (530) 934-6571

This claim is filed for fiscal year 20 —	20				
This is a Supplemental Affidavit filed with					
☐ BOE-267, Claim for Welfare Exe	mption (First Filing)				
BOE-267-A, Claim for Welfare E	xemption (Annual Filing)				
In the case of a claim, for low-income re liability company, that does not receive goertain limit if 90 percent or more of the or by Section 50053 of the Health and Safety a taxpayer, with respect to a single prope must complete this affidavit if you checke of section 214(g)(1)(C).  SECTION 1. IDENTIFICATION OF APPLI	covernment financing o cupants of the property Code. The total exempt ty or multiple propertie d box C(3) in Section 3 of	r receive low-ir are lower incor ion amount allo s, may not exce of form BOE-26	ncome housing tax creme households whose owed under Revenue a seed twenty million doll.  7-L indicating you are	edits, may qualify for rent does not exceed and Taxation Code se ars (\$20,000,000) in a	r exemption up to a I the rent prescribed ction 214(g)(1)(C) to assessed value. You
Name of Organization				Corporate ID or LLC	Number
Address of Property (number and street)	<u> </u>	/ /			
City, County, Zip Code	$A\Lambda$				
A. List of Qualified Households Section 259.14 of the California Revenue as an affidavit reporting the following information income, the maximum rent that can be characteristically additional sheets as necessary. Report information in the can be characteristically and the can be characteristically and the can be considered in the can be considered in the can be calculated as a case of the can be calculated in the can be calculated as a case of the case of th	on on the units occu <mark>pie</mark> d l ged to the househ <mark>old</mark> , ar	by lowe <mark>r income</mark> nd the <mark>ac</mark> tual re	ho <mark>us</mark> eho <mark>ld</mark> s for which e nt. Use the table below	exemption is claimed: to provide the require	the actual household
Address/Unit Number		f Persons in ousehold	Income	Maximum Allowable Rent That Can Be Charged for the Unit	Actual Rent Charged to the Tenant
		0			
I certify (or declare) under penalty of per	iury under the laws of the ements or documents, is a		nia that the foregoing an		
NAME OF CLAIMANT		TITLE		, Momeage and b	DATE
SIGNATURE OF CLAIMANT		DAYTIME TELEPH	ONE	EMAIL ADDRESS	<u> </u>
		·			

# 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.

