BOE-267-L2 (P1) (06-17)

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

Larie Durham Calaveras County Assessor

891 Mountain Ranch Road San Andreas, CA 95249 209.754.6356 assessorpublic@co.calaveras.ca.us

This claim is filed for fiscal year 20 — 20				
This is a Supplemental Affidavit filed with				
☐ BOE-267, Claim for Welfare Exemption (First Filing	<b>a</b> )			
BOE-267-A, Claim for Welfare Exemption (Annual	Filing)			
In the case of a claim, for low-income rental housing pro liability company, that does not receive government finan certain limit if 90 percent or more of the occupants of the proby Section 50053 of the Health and Safety Code. The total to a taxpayer, with respect to a single property or multiple must complete this affidavit if you checked box $C(3)$ in Secon section $214(g)(1)(C)$ .	ocing or receive low coperty are lower inc exemption amount properties, may no	-income housing tax of come households whost allowed under Revent t exceed ten million do	redits, may qualify for e rent does not exceed ue and Taxation Code s Ilars (\$10,000,000) in a	exemption up to a the rent prescribed section 214(g)(1)(C) ssessed value. You
SECTION 1. IDENTIFICATION OF APPLICANT AND IDEN	NTIFICATION OF P	ROPERTY		
me of Organization			Corporate ID or LLC Number	
Address of Property (number and street)				
City, County, Zip Code				
additional sheets as necessary. Report information for each un  Address/Unit Number	No. of Persons in Household	Annual Household Income	m BOE-267-L.  Maximum Allowable  Rent That Can Be  Charged	Actual Rent Charged
I certify (or declare) under penalty of perjury under the laws any accompanying statements or docume	CERTIFICA s of the State of Calif ents, is true, correct, a	ornia that the foregoing a	and all information conta of my knowledge and be	ined herein, including elief.
NAME OF CLAIMANT	TIT	LE		DATE
SIGNATURE OF CLAIMANT	DAYTIME TELEF	PHONE	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.

