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

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

MARK CHURCH
Assessor - County Clerk - Recorde

555 County Center Redwood City, CA 94063 P 650.363.4500 F 650.599.7435 email: assessor@smcacre.gov

EMAIL ADDRESS

web: www.smcacre.gov

HOUSING — LOWER INCOME HOUSEHOLDS — TENANT DATA						
This claim is filed for fiscal year 20 — 20						
This is a Su	upplemental Affidavit filed with					
	BOE-267, Claim for Welfare Exemption (First Filing)					
	BOE-267-A, Claim for Welfare Exemption (Annual Filing)					

In the case of a claim, for low-income rental housin liability 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 multipmust complete this affidavit if you checked box C(3) is of section 214(g)(1)(C).	financing or receive low the property are lower inc total exemption amount a ble properties, may not ex	income housing tax of ome households whos llowed under Revenue ceed twenty million do	credits, may qualify for se rent does not exceed and Taxation Code second ollars (\$20,000,000) in a	exemption up to a the rent prescribed ction 214(g)(1)(C) to ssessed value. You		
SECTION 1. IDENTIFICATION OF APPLICANT AND	IDENTIFICATION OF PR	ROPERTY				
Name of Organization			Corporate ID or LLC Number			
Address of Property (number and street)						
City, County, Zip Code						
A. List of Qualified Households Section 259.14 of the California Revenue and Taxation Code provides that claims on "qualified property" as described in section 214.17 shall include an affidavit reporting the following information on the units occupied by lower income households for which exemption is claimed: the actual household income, the maximum rent that can be charged to the household, and the actual rent. Use the table below to provide the required information. Attact additional sheets as necessary. Report information for each unit that was reported in Section 4, part B of form BOE-267-L. Address/Unit Number No. of Persons in Household Income No. of Persons in Household Income Charged for the Unit Actual Rent Charged to the Tenant						
I certify (or declare) under penalty of perjury under th any accompanying statements or de	CERTIFICA e laws of the State of Califo couments, is true, correct, a	ornia that the foregoing	and all information conta of my knowledge and he	ined herein, including elief.		
NAME OF CLAIMANT	тіті	·	, , , , , , , , , , , , , , , , , , , ,	DATE		

THIS DOCUMENT IS CONFIDENTIAL AND IS NOT SUBJECT TO PUBLIC DISCLOSURE

DAYTIME TELEPHONE



SIGNATURE OF CLAIMANT

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.

