BOE-267-L2 (P1) REV 03 (05-21)



# David Peets Alpine County Assessor/Recorder

50 Diamond Valley Rd. P.O. Box 155 Markleeville, CA 9612

# 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 (Fig.	irst Filing)				
BOE-267-A, Claim for Welfare Exemption (	(Annual Filing)				
n the case of a claim, for low-income rental hous iability company, that does not receive governme certain limit if 90 percent or more of the occupants on Section 50053 of the Health and Safety Code. The ataxpayer, with respect to a single property or multimust complete this affidavit if you checked box C(3 of section 214(g)(1)(C).  SECTION 1. IDENTIFICATION OF APPLICANT AND	ent financing coof the property ne total exemp litiple propertie B) in Section 3	or receive low- y are lower inco tion amount a es, may not ex of form BOE-2	income housing tax of the come households whose lowed under Revenue ceed twenty million do 267-L indicating you ar	redits, may qualify for e rent does not exceed and Taxation Code so llars (\$20,000,000) in	or exemption up to a d the rent prescribed ection 214(g)(1)(C) to assessed value. You
Name of Organization				Corporate ID or LLC	Number
Address of Property (number and street)					
City, County, Zip Code		////		Assessor's Parcel/As	sessment Number(s)
SECTION 2. HOUSEHOLD INFORMATION					
A. List of Qualified Households			_		
Section 259 14 of the Revenue and Taxation Code pr	ovides that cla	ims on "qualifie	ed property" as describe	ed in section 214 17 sh	all include an affidavit
reporting the following informatio <mark>n o</mark> n the un <mark>its occu</mark> pion maximum rent that can be char <mark>ged</mark> to the ho <mark>us</mark> eh <mark>old</mark> , a	ed by lower ind and the actual re s reported in S	come househol ent. Use the tak	ds for which exemption be below to provide the	is claimed: the actual herequired information. At Maximum Allowable Rent That Can Be	ousehold income, the tach additional sheets  Actual Rent Charged to
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# 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, the county in which the property is located, and the assessor's parcel number or assessment number of the property.

## 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.

