BOE-267-L4 (P1) REV 00 (05-24)

WELFARE EXEMPTION SUPPLEMENTAL AFFIDAVIT, HOUSEHOLDS EXCEEDING LOW-INCOME LIMITS "OVER-INCOME" TENANT DATA (100% AMI)



James B Rooney Assessor of Amador County

DATE

EMAIL ADDRESS

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This is a Supplemental Affidavit filed with					
☐ BOE-267, Claim for Welfare Exer	mption (First Filing)				
☐ BOE-267-A, Claim for Welfare Ex	emption (Annual Fili	ng)			
n the case of an owner of property that is reated as occupied by a lower income h on subsequent lien dates the household in	nousehold for welf	are exemption p	urposes of Revenue a	and Taxation Cod	unit shall continue to be section 214(g), even
 the occupants' household income is n the occupants were a lower income ho the unit remains rent-restricted. 					ze,
You must complete this affidavit if you che exemption on a unit under the provisions				indicating that yo	u are seeking
SECTION 1. IDENTIFICATION OF APPLIC	CANT AND IDENT	FICATION OF P	ROPERTY		_
Name of Organization			Corporate ID	or LLC Number	
address of Property (number and street)					
	Λ		A control D		In the second second
City, County, Zip Code	/ \ /\		Assessor's Pa	arcel/Assessment N	Num <mark>be</mark> r(s)
ECTION 2. HOUSEHOLD INFORMATION	N N	VIII			
A. List of Qualified Households					
Section 259.15 of the Revenue and Taxa ental housing property that is <mark>subject to</mark> on units occupied by househo <mark>lds</mark> whose i	an enforceable and ncomes rise above	d verifiable agree the lower incon	ement with a public ag ne limit but do not exc	ency, where the deed 100 percent	claimant seeks exempt of area medium incor
shall be accompanied by an <mark>aff</mark> idavit tha <mark>t</mark> Inits where the occupant init <mark>ial</mark> ly met the					
ower income units under the provision of	section 214(g)(2)(A	()(iii) of the Reve	nue and Taxation Code	e. Provide i <mark>nf</mark> orma	tion for each unit that v
ncluded on BOE-267-L or B <mark>OE-267-L1</mark> in out do not exceed 100% AMI ("over-incom				ouseholds excee	ding lower income lim
out do not exceed 100 % Alvii (over-incom		additional sneets	s, irriecessary.	_	
	No. of				
Address/Unit Number	Persons in Household	Household	Maximum Allowable Rent That Can Be Charged for the Unit	Actual Rent Charged to the Tenant	Percentage of AMI From Which Maximum Rent
Address/Unit Number	P <mark>er</mark> sons in	Household	Rent That Can Be	Charged to	From Which
Address/Unit Number	P <mark>er</mark> sons in	Household	Rent That Can Be	Charged to	From Which Maximum Rent
Address/Unit Number	P <mark>er</mark> sons in	Household	Rent That Can Be	Charged to	From Which Maximum Rent
Address/Unit Number	P <mark>er</mark> sons in	Household	Rent That Can Be	Charged to	From Which Maximum Rent
Address/Unit Number	P <mark>er</mark> sons in	Household	Rent That Can Be	Charged to	From Which Maximum Rent
Address/Unit Number	P <mark>er</mark> sons in	Household	Rent That Can Be	Charged to	From Which Maximum Rent
Address/Unit Number	P <mark>er</mark> sons in	Household	Rent That Can Be	Charged to	From Which Maximum Rent
Address/Unit Number	P <mark>er</mark> sons in	Household	Rent That Can Be	Charged to	From Which Maximum Rent

THIS DOCUMENT IS CONFIDENTIAL AND IS NOT SUBJECT TO PUBLIC DISCLOSURE

TITLE

DAYTIME TELEPHONE

NAME OF CLAIMANT

SIGNATURE OF CLAIMANT

INSTRUCTIONS FOR FILING WELFARE EXEMPTION SUPPLEMENTAL AFFIDAVIT, HOUSEHOLDS EXCEEDING LOW-INCOME LIMITS — "OVER-INCOME" TENANT DATA (100% AMI)

This affidavit must be filed when seeking the welfare exemption on lower income rental housing property under the provisions of Revenue and Taxation Code sections 214(g)(2)(A)(iii) and 259.15. These provisions are only applicable to lower income rental housing properties that is subject to an enforceable and verifiable agreement with a public agency and owned and operated by a nonprofit organization, eligible limited liability company, or limited partnership with an eligible managing general partner. Under these provisions, the welfare exemption continues to be available where the occupant(s) of a unit originally met the lower income threshold on the lien date in the fiscal year in which the occupancy of the unit commenced, but the household income of the occupants increased in subsequent years above the lower income limits, as long as the income does not exceed 100 percent of area median income (AMI), adjusted for family size ("overincome" tenants), and the unit continues to be rent restricted.

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 as provided for in Revenue and Taxation Code section 270. A separate affidavit must be filed for each location upon which you are seeking exemption under the provisions of Revenue and Taxation Code section 214(g)(2)(A)(iii). If you indicated on supplemental affidavit BOE-267-L, Welfare Exemption Supplemental Affidavit, Housing – Lower Income Households, or BOE 267-L1, Welfare Exemption Supplemental Affidavit, Low-Income Housing Property Of Limited Partnership, that you are seeking exemption under this criteria, 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 259.15, the assessor shall keep this form confidential.

FISCAL YEAR

The fiscal year for which an exemption is being sought must be entered correctly. The proper fiscal year would be the fiscal year that follows the lien date (12:01 a.m., January 1) for which the taxable or exempt status of the property is being determined. For example, a person filing a timely claim in February 2018 would enter fiscal year "2018-2019" on their claim form. However, an entry of "2017-2018" on a claim form 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, the 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 households for which the organization is seeking exemption under the provisions of Revenue and Taxation Code section 214(g)(2)(A)(iii), as indicated upon checking the box in Section 4.A2 on BOE-267-L or BOE 267-L1. This listing shall be those units included in the number of residential units occupied by households exceeding lower income limits but do not exceed 100% AMI shown in Section 4.C2 on BOE-267-L or BOE 267-L1.

