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

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

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Matthew R. Maynard

**Placer County Assessor** 

This is a Supplemental Affidavit filed with				
BOE-267, Claim for Welfare Exemption (First Fili	ng)			
☐ BOE-267-A, Claim for Welfare Exemption (Annua	al Filing)			
In the case of a claim, for low-income rental housing poliability company, that does not receive government final certain limit if 90 percent or more of the occupants of the by Section 50053 of the Health and Safety Code. The tota a taxpayer, with respect to a single property or multiple property complete this affidavit if you checked box C(3) in Section 214(g)(1)(C).  SECTION 1. IDENTIFICATION OF APPLICANT AND IDENTIFICATION AND IDENTIFICATION OF APPLICANT AND IDENTIFICATION AND IDENTIFICATION AND IDENTI	ancing or receive lov property are lower in il exemption amount properties, may not e ection 3 of form BOE	w-income housing tax cre come households whose allowed under Revenue a exceed twenty million dolla -267-L indicating you are	dits, may qualify for rent does not exceed nd Taxation Code sears (\$20,000,000) in a	r exemption up to a the rent prescribed ction 214(g)(1)(C) to essessed value. You
Name of Organization			Corporate ID or LLC N	lumber
Address of Property (number and street)	<b>A</b> /			
City, County, Zip Code			As <mark>sessor's Parcel</mark> /Ass	essment Number(s)
A. List of Qualified Households  Section 259.14 of the Revenue and Taxation Code provides reporting the following information on the units occupied by maximum rent that can be charged to the household, and the as necessary. Report information for each unit that was reported.	low <mark>er i</mark> ncome ho <mark>use</mark> ho ac <mark>tua</mark> l rent. Use the t	olds for which exemption is able below to provide the re	claimed: the actual ho	ousehold income, the
Address/Unit Number	No. of Persons in Household	Annual Household Income	Maximum Allowable Rent That Can Be	Actual Rent
			harged for the Unit	Charged to the Tenant
	JS		charged for the Unit	Charged to
	IS		charged for the Unit	Charged to
	<b>/S</b>		charged for the Unit	Charged to
I certify (or declare) under penalty of perjury under the la any accompanying statements or docum	CERTIFIC ws of the State of Calments, is true, correct,	ATION ifornia that the foregoing an	d all information conta	Charged to the Tenant
I certify (or declare) under penalty of perjury under the la any accompanying statements or docum	ws of the State of Cal ments, is true, correct,	ATION ifornia that the foregoing an	d all information conta	Charged to the Tenant

# 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 does not 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.

