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

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



### Matthew R. Maynard Placer County Assessor

EMAIL ADDRESS

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•	,					
This claim is filed for fiscal year 20 — 20	_					
This is a Supplemental Affidavit filed with						
☐ BOE-267, Claim for Welfare Exemption (	First Filing)					
☐ BOE-267-A, Claim for Welfare Exemption	n (Annual Filir	ng)				
In the case of an owner of property that is subject reated as occupied by a lower income househon subsequent lien dates the household income	old for welfa	are exemptio	n purposes	of Revenue	and Taxation Code	
<ul><li>(1) the occupants' household income is no more</li><li>(2) the occupants were a lower income househole</li><li>(3) the unit remains rent-restricted.</li></ul>						ze,
You must complete this affidavit if you checked the exemption on a unit under the provisions of Reve					indicating that you	are seeking
SECTION 1. IDENTIFICATION OF APPLICANT	AND IDENTI	FICATION O	PROPER	rY		
Name of Organization				Corporate ID	or LLC Number	
Address of Property (number and street)						
City, County, Zip Code				Assessor's F	Parcel/ <mark>Ass</mark> essment N	lum <mark>be</mark> r(s)
SECTION 2. HOUSEHOLD INFORMATION						
A. List of Qualified Households						_
Section 259.15 of the Revenue and Taxation Corental housing property that is subject to an enforce on units occupied by households whose incomes shall be accompanied by an affidavit that reports units where the occupant initially met the income lower income units under the provision of section included on BOE-267-L or BOE-267-L1 in Section but do not exceed 100% AMI ("over-income" tena	orceable and s rise above s specific inferior at 1214(g)(2)(A) on 4.C2 (Nur	verifiable ag the lower ind ormation. Us nd the unit on (iii) of the Re nber of reside	reement wit of the come limit I be the table ontinues to evenue and ential units	th a public agout do not ex- below to prov be rent restric Taxation Cod occupied by	gency, where the coceed 100 percent ride the required in cted, as they may be. Provide informa	laimant seeks exemptio of area medium income formation, listing all suc continue to be treated a tion for each unit that wa
	No. of ersons in lousehold	Annual Household Income	Rent Th	Allowable at Can Be for the Unit	Actual Rent Charged to the Tenant	Percentage of AMI From Which Maximum Rent Charged is Derived
		CERTIF	ICATION			
I certify (or declare) under penalty of perjury including any accompanying stateme	under the las					
	ents or docum	ws of the State nents, is true. o	of California correct, and	a that the foreg	oing and all informa be best of my knowled	tion contained herein, dge and belief.

THIS DOCUMENT IS CONFIDENTIAL AND IS NOT SUBJECT TO PUBLIC DISCLOSURE

DAYTIME TELEPHONE

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.

