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

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



Tom J. Slavich San Benito County Assessor

440 Fifth St. Rm. 108 Hollister, CA 95023-3893 Tel: 831-636-4030 Fax: 831-636-4033

www.cosb.us/government/assessor

This claim i	s filed for fiscal year 20 <u>20</u> — 20 <u>21</u>
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)

n the case of a claim, for low-income rental iability company, that does not receive gover certain limit if 90 percent or more of the occupacy Section 50053 of the Health and Safety Cod a taxpayer, with respect to a single property or must complete this affidavit if you checked bot of section 214(g)(1)(C).	rnment financing or receive ants of the property are lower e. The total exemption amou r multiple properties, may no	low-income housing tax of income households who introduced under Revenue texceed twenty million do	credits, may qualify for se rent does not exceed a and Taxation Code se ollars (\$20,000,000) in a	exemption up to the rent prescribe ction 214(g)(1)(C) t assessed value. Yo
SECTION 1. IDENTIFICATION OF APPLICAN	IT AND IDENTIFICATION O	F PROPERTY		
Name of Organization	Corporate ID or LLC Number			
Address of Property (number and street)				
City, County, Zip Code				
SECTION 2. HOUSEHOLD INFORMATION				
A. List of Qualified Households				
Section 259.14 of the California Revenue and Ta an affidavit reporting the following information on ncome, the maximum rent that can be charged additional sheets as necessary. Report informatio	the units occupied by lower in to the household, and the act	ncome households for whic ual rent. Use the table belo	h exemption is claimed: ow to provide the require	the actual househo
Address/Unit Number	No. of Persons Household	Annual Household Income	Maximum Allowable Rent That Can Be Charged for the Unit	Actual Rent Charged to the Tenant
I certify (or declare) under penalty of perjury ι any accompanying statemer				
NAME OF CLAIMANT		TITLE		DATE
SIGNATURE OF CLAIMANT	DAYTIME T	ELEPHONE	EMAIL ADDRESS	

()

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.