CITY OF OAKLAND



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 Finance & Management Agency
 (510) 238-6118/ FAX (510) 238-6431

 Revenue Division
 TDD (510) 238-3254

EXEMPTION REQUEST FOR OWNERS OF LOW INCOME HOUSING TAX-CREDIT FINANCED AFFORDABLE HOUSING DEVELOPMENTS.

To receive consideration for the exemption, a claimant must complete and file this form with the Business Tax office by November1st. A separate claim form is required for each location.

Business Tax Account # _____ Ownership Name: Property Address: City, State, Zip:

I hereby petition for an exemption from the business tax under Oakland Municipal Code 5.04.630 Exemption for Nonprofit Corporation, Association, Etc. - Exemption for Owners of Low Income Housing Tax-Credit Financed Affordable Housing Developments. Please check all that apply:

- □ The owner of the affordable housing project has received federal and/or state low income housing tax credits in connection with the affordable housing ownership.
- The property is owned and operated by a partnership in which the managing partner is an eligible nonprofit corporation or limited liability company. Please list the name and address of the managing partner. Name: Address:

City, State, Zip:

- □ The property qualifies for the property tax exemption.
- The following documents are attached to this exemption request to support the validity of this claim:

Business Tax Renewal Declaration
 BOE 267-A <u>AND</u> BOE 267-L
 Rent roll
 Income Statement
 Federal Income Tax Return

A VALID CLAIM MUST INCLUDE ALL SUPPORTING DOCUMENTS

| NAME OF PERSON TO CONTACT FOR ADDITIONAL | DAYTIME PHONE NUMBER | | | |
|---|--|--------------------|--|--|
| I certify (or declare) under penalty of perjury that all in | or declare) under penalty of perjury that all information contained herein, including any accompanying statements or documents, is true, correct, a complete to the best of my knowledge and belief. | | | |
| SIGNATURE OF CLAIMANT | TITLE | DATE | | |
| E-MAIL ADDRESS | | | | |
| Submit this form along | with the documents listed above to a | udit@oaklandca.gov | | |

| For Office Use Only: | | | | Initials |
|----------------------|------------------------------|---------|--------|----------------|
| | Approved: □ Granted Reason: | Pending | Denied | Date Received: |