

OTC 988-A <small>Revised 5-2017</small>	State of Oklahoma REPORT FOR CHARITABLE RESIDENTIAL RENTAL ACCOMMODATIONS _____ County	Tax Year 2018
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Real Estate Account: _____	Company Name: _____
LEGAL DESCRIPTION: _____	School District _____

OCCUPANCY RATE AFFIDAVIT

I, the undersigned, am personally acquainted with the use of the property hereinafter described, to wit:

(Mailing Address) _____

(Physical Address) _____

Phone Number: _____ Email Address: _____

If the owner of any charitable residential rental accommodations subject to the requirements in 68 O.S., Section 2887 subsection 8, requests Ad Valorem Tax exemption pursuant to the above title and section, such owner is subject to submission of this form to the county assessor **no later than December 15**.

Please respond to the following questions:

1. Was the property occupied as of January 1 of the current year?..... Yes No

2. Is the property a single-family residential dwelling?..... Yes No

3. Is the property a multi-family residential dwelling? Yes No

4. If multi-family, what is the number of residential units? _____ .


5. Does the property satisfy the income standards set-forth in Internal Revenue Service Revenue Procedure 96-32?..... Yes No

6. What is the average occupancy rate for the previous eleven (11) months, based on the total number of units suitable for occupancy? _____ .

7. **If the occupancy rate is less than seventy-five percent (75%) the property shall not be exempt.**

If the property provides residential rental accommodations or is subject to the occupancy requirements required in 68 O.S. , Sec. 2887 subsection 8, the owner shall submit a copy of this form to the county assessor by December 15 of each year requesting an exemption. Any information stated or implied is subject to audit by the county assessor.

I, _____ being duly sworn upon oath, under the penalties of perjury,
do hereby depose and say that I am _____ of _____,
that as such I am acquainted with the books, accounts and affairs of said entity or institution and know the above statements to be true, correct and complete, and that all information requested herein has been fully and completely given and I understand this is an annual affidavit that must be filed with the county assessor each year by December 15.

 Signature _____ Date _____