

Notice of Property Noncompliance Filed in Error Substandard Rental Housing

Regulatory Agency Information				
Agency:				
Address:				
Contact Person:		Telephone Number:	Date of Noncompliance:	
We issued the <i>Notice of Property Noncompliance</i> to you in error, accord Sections 17274 or 24436.5. This notice cancels the erroneous notice yo				
I,, certify that the Notice of P	roperty Nonce	ompliance, reco	orded on,	
in the office of the County Recorder of the County of	, was is	ssued in error a	nd is canceled.	
Document number				
Signature				
Property Owners (Attach additional list if necessary.)				
1. Name of Owners:		SS	SN or CDL:	
Mailing Address:				
2. Name of Owners:		SS	SN or CDL:	
Mailing Address:				
3. Name of Owners:		SS	GN or CDL:	
Mailing Address:				
Rental Housing Property				
Street Address:	Parcel:	Lot:	Block Number:	
Mailing Address: (enter only if different from the street address)	Description: (e.g., condominium, duplex, apartment building, house, etc.)			
Authorization	<u> </u>			
Name of Regulatory Agency Contact				
ignature of Authorized Representative of Regulatory Agency			te of Signature	

Mail or fax duplicate copies to the Franchise Tax Board, county recorder, and property owner.

Instructions to Complete Notice of Property Noncompliance Filed in Error

Follow the instructions below to complete this notice if you issued the *Notice of Property Noncompliance* in error. Do **not** complete this form if you did not notify the Franchise Tax Board of noncompliance.

Regulatory Agency Information

- Agency: Enter the full name of your agency.
- Address: Enter the complete mailing address, including ZIP Code.
- **Contact Person:** Enter the name of person to contact for additional information.
- Telephone Number: Enter the area code and telephone number of contact person.
- Date of Cancellation: Enter the date your agency determined the Notice of Property Noncompliance was issued in error.

Property Owners

- Names of Owners: Enter the name of the individuals, previously notified of noncompliance and now notified of compliance reinstatement. It is important to mail each owner a *Notice of Property Noncompliance Filed in Error*. It is not necessary to type a separate form for each individual; instead, mail a completed and signed copy of the *Notice of Property Noncompliance Filed in Error* to each individual.
- Mailing Address: Enter the last known address for the owners listed.
- Social Security Number (SSN) or California Driver License Number (CDL): Enter the SSN or CDL. The Franchise Tax Board cannot take any action, according to R&TC Sections 17274 and 24436.5, without these numbers.

Rental Housing Property

- Street Address: Enter the street address of the property in cancellation.
- Parcel Lot Block Number: Enter numbers officially assigned to the plot of land.
- **Mailing Address:** If different from the property street address, enter the last known mailing address of the property owner, including ZIP Code.
- **Description:** Enter a brief physical description of the property (e.g., condominium, duplex, apartment building, house, etc.).

Authorization

The representative should be familiar with the building codes and R&TC Sections 17274 and 24436.5.

- Signature of Authorized Representative of Regulatory Agency: Signature required.
- Name of Regulatory Agency Contact: Enter contact name.
- Date of Signature: Enter date notice signed.

Mail the original *Notice of Property Noncompliance Filed in Error* to the property owners you listed on SIDE 1. Retain a copy for your agency's files and mail or fax a copy to:

Mail: STATE OF CALIFORNIA SUBSTANDARD HOUSING UNIT MS F340 FRANCHISE TAX BOARD PO BOX 1673 SACRAMENTO CA 95812-1673

Fax: 916.843.2306

For privacy information, refer to FTB 1131, Franchise Tax Board Privacy Notice.

Privacy information for third parties, refer to FTB 1131J, Privacy Notice - Third Party Contacts.

Connect With Us		
Web: ftb.ca.gov	Phone:	916.845.5296 8 a.m. to 5:30 p.m. weekdays, except state holidays
		916.845.6500 from outside the United States
	TTY/TDD:	800.822.6268 for persons with hearing or speech impairments