

City of Oakland VPT c/o VPT Administrator 5627 Telegraph Ave #402 Oakland, CA 94609 oaklandVPT@sci-cg.com (855) 831-1188 oaklandca.gov/topics/vacantpropertytax

## **VACANT PROPERTY TAX NO-INCOME AFFIDAVIT**

Parcel Number		Address		
		Oakland, CA 94		
Information on <b>OWNER</b> No- If the owner of the p	property o	lid not receive any income d	uring a tax year, fill out th	ne owner section below.
Last Name			Middle Name	Social Security Number
		First Name	as.e mane	
	ber is age ber is age	ER No-Income Affidavit. 18 and over and has no inco 26 or younger and is listed a	ome, a No-Income Affidav	
☐ If applicable, to be com	pleted by	HOUSEHOLD MEMBER		
Last Name		First Name	Middle Name	Social Security Number
I declare under penalty of		nat I have not received any in		
Signature			Date	