CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD

NAME AND MAILING ADDRESS

(Make necessary corrections to the printed name and mailing address.)



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A. PROPERTY ASSESSOR'S PARCEL/ID NUMBER					
ASSESSOR'S PARCEL/ID NUMBER					
PROPERTY ADDRESS					
RECORDER'S DOCUMENT NUMBER					
PROBATE NUMBER (if applicable) DATE OF DEATH (if applicable) DATE OF DECREE OF DISTRIBUTION (if applicable)					
The disclosure of social security numbers is mandatory as required by Revenue and Taxation Code section 63.1. [See Title 42 Uni States Code, section 405(c)(2)(C)(i) which authorizes the use of social security numbers for identification purposes in the administration of a tax.] A foreign national who cannot obtain a social security number may provide a tax identification number issued by the Internal Rever Service. The numbers are used by the Assessor and the state to monitor the exclusion limit.	any				
B. TRANSFEROR(S)/SELLER(S) (additional transferors please complete Section D on the reverse)					
1. Print full name(s) of transferor(s)					
2. Social security number(s)					
3. Family relationship(s) to transferee(s)					
If adopted, age at time of adoption					
4. Was this property the transferor's principal residence? 🛛 Yes 🔲 No					
If yes , please check which of the following exemptions was granted or was eligible to be granted on this property:					
□ Homeowners' Exemption □ Disabled Veterans' Exemption					
5. Have there been other transfers that qualified for this ex <mark>cl</mark> usion? 🗌 Yes 🔲 No					
If yes , please attach a list of all previous transfers that qualified for this exclusion. (This list should include for each property: the County Assessor's parcel number, address, date of transfer, names of all the transferees/buyers, and family relationship. Transferor's principresidence must be identified.)					
6. Was only a partial interest in the property transferred? 🛛 Yes 🔲 No 🛛 If yes, percentage transferred%					
7. Was this property owned in joint tenancy? \Box Yes \Box No					
<u>IMPORTANT</u> : If the transfer was through the medium of a will and/or trust, you must attach a full and complete copy of the will and or trust and all amendments.	1				
CERTIFICATION					
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including a accompanying statements or documents, is true and correct to the best of my knowledge and that I am the parent or child (or transferor's le representative) of the transferees listed in Section C. I knowingly am granting this exclusion and will not file a claim to transfer the base year va of my principal residence under Revenue and Taxation Code section 69.5.	gal				
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE PRINTED NAME DATE					
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE PRINTED NAME DATE					
MAILING ADDRESS DAYTIME PHONE NUMBER					
CITY, STATE, ZIP EMAIL ADDRESS					

(Please complete applicable information on reverse side.) THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

C. TR	ANSFEREE(S)/BUYER(S) (ad	ditional transferees please complete Sect	ion E below)			
1.	Print full name(s) of transferee	•(s)				
2.	2. Family relationship(s) to transferor(s)					
	If adopted, age at time of adoption					
	ermination of partnership					
If terminated by death, had the surviving stepparent remarried or entered into a registered domestic partnership as of the date or or transfer? \square Yes \square No						
	If in-law relationship is involved, was the child-in-law still married to or in a registered domestic partnership with the child on the da purchase or transfer? Divorce/Termination of partnership terminated by: Death Divorce/Termination of partnership					
	If terminated by death, had the surviving child-in-law remarried or entered into a registered domestic partnership as of the date of purchas or transfer? 🗌 Yes 🗌 No					
3.	 ALLOCATION OF EXCLUSION (If the full cash value of the real property transferred exceeds the one million dollar value exclusion, the transferee must specify on an attachment to this claim the amount and allocation of the exclusion that is being sought.) 					
		CERTIFICATIO	N			
accom repress the Re	panying statements or docume entative) of the transferors liste venue and Taxation Code.	erjury under the laws of the State of Calif hts, is true and correct to the best of my F d in Section B; and that all of the transfer	nowledge and that I am the page of the pag	arent or child <mark>(o</mark> r transferee's legal		
SIGNATU	JRE OF TRANSFEREE OR LEGAL REPR	ESENTATIVE PRINTED NAME	DATE			
MAILING	AILING ADDRESS					
CITY, ST	ATE, ZIP		EMAILADDRESS			
Note:	The Assessor may contact you	or additional information.				
D. AD	DITIONAL TRANSFEROR(S)	SELLER(S)				
	NAME	SOCIAL SECURITY NUMBER	SIGNATURE	RELATIONSHIP		

E. ADDITIONAL TRANSFEREE(S)/BUYER(S)

NAME	RELATIONSHIP



CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD

Revenue and Taxation Code, Section 63.1

IMPORTANT: In order to qualify for this exclusion, a claim form must be completed and signed by the transferors and a transferee and filed with the Assessor. A claim form is timely filed if it is filed within three years after the date of purchase or transfer, or prior to the transfer of the real property to a third party, whichever is earlier. If a claim form has not been filed by the date specified in the preceding sentence, it will be timely if filed within six months after the date of mailing of a notice of supplemental or escape assessment for this property. If a claim is not timely filed, the exclusion will be granted beginning with the calendar year in which you file your claim. Complete all of Sections A, B, and C and answer each question or your claim may be denied. Proof of eligibility, including a copy of the transfer document, trust, or will, may be required. In situations where all information is not known by the due date, the parties should file this claim with as much information as possible, and later amend the claim with any revised information. *Please note*:

- 1. This exclusion only applies to transfers that occur on or after November 6, 1986 and on or before February 15, 2021.
- 2. In order to qualify, the real property must be transferred from parents to their children or children to their parents.
- 3. If you do not complete and return this form, it may result in this property being reassessed.
- 4. Revenue and Taxation Code section 63.1 provides, with certain limitations, that a "change in ownership" does not include the purchase or transfer of:

The principal residence between parents and children, and/or

The first \$1,000,000 of the factored base year value of other real property between parents and children.

NOTE: Effective January 1, 2009, Revenue and Taxation Code section 63.1(j) allows a county board of supervisors to authorize a onetime processing fee of not more than \$175 to recover costs incurred by the County Assessor due to the failure of an eligible transferee to file a claim for the parent-child change in ownership exclusion after two written requests have been sent to an eligible transferee by the County Assessor.

For transfers occurring on or after February 16, 2021, please file form BOE-19-P, Claim for Reassessment Exclusion for Transfer Between Parent and Child Occurring on or After February 16, 2021.

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