| -58-н-R01-1212-11000354-1<br>E-58-H REV. 01 (12/12)<br>AFFIDAVIT OF COTENANT RESIDENCY   | S COLOR TO   | Sendy Perez<br>Glenn County Assessor/Clerk/Record<br>516 W. SYCAMORE ST., 2ND FLOOR<br>WILLOWS, CA 95988  |
|--|--|---|
| A DATE OF COLLAR REODEROT  | Sturning.  | Phone: (530) 934-6402<br>FAX: (530) 934-6571  |
| NAME AND MAILING ADDRESS   |  |   |
| (Make necessary corrections to the printed name and mailing address)   | ٦  |   |
| L  | 62.3, if co<br>interest i<br>cotenant<br>not a cha | e provisions of Revenue and Taxation Code section<br>ertain conditions are met, a transfer of a cotenancy<br>in real property from one cotenant to the other<br>t that takes effect upon the death of one cotenant is<br>ange in ownership. This applies to transfers that<br>o or after January 1, 2013. |
| L  |  |   |
| The change in ownership exclusion for a transfer of an interest in re<br>applies as long as all of the following are met:  | $\mathbf{C}$                                       |   |
| <ul> <li>The transfer is solely by and between two individuals who toge</li> <li>As a result of the death of the transferor cotenant, the decease resulting in the surviving cotenant owning 100 percent of the resulting in the surviving cotenant owning 100 percent owning 100 perc</li></ul> | ed cotenant's interest in the                      | e real property is transferred to the surviving cotenant,   |
| <ul> <li>For the one-year period immediately preceding the death of the</li> </ul>   |  |   |
| <ul> <li>The real property was the principal residence of both cotenants</li> <li>For the one-year period immediately preceding the death of the</li> </ul>  |  |   |
| <ul> <li>For the one-year period infinediately preceding the death of the</li> <li>The surviving cotenant must sign, under penalty of perjury, an</li> </ul>   |  |   |
| deceased cotenant for the one-year period immediately preced   |  |   |
| NAME OF SURVIVING COTENANT   |  |   |
|  |  |   |
| NAME OF DECEASED COTENANT  |  | DATE OF DEATH   |
| STREET ADDRESS OF REAL PROPERTY  |  | ASSESSOR'S PARCEL NUMBER (APN)  |
| CITY, STATE, ZIP CODE  |  |   |
| Property was eligible for:  Homeowners' Exemption  | Disabled Veterans' Exemp                           | tion  |
| Disposition of real property:  |  |   |
| Affidavit of death of joint tenant   |  |   |
| Decree of distribution pursuant to will or intestate succession  | on   | —   |
| Action of trustee pursuant to terms of trust (Attach a complete complete)  | lete copy of trust and all an                      | nendments)  |
| 1. Was this real property the principal residence of the deceased cot  | tenant the one-year period                         | prior to the date of death?  Yes  No  |
| 2. Was this real property the principal residence of the surviving cote  | enant the one-year period p                        | prior to the date of death?   |
| 3. Are there any other beneficiaries of the real property?  Yes  | □ No   |   |
| If yes, please list other beneficiaries:   |  |   |
|  |  |   |
| I certify (or declare) under penalty of perjury under the laws of t<br>any accompanying statements or documents, is true and correc  | ct to the best of my know                          | t the foregoing and all information hereon, including wledge and that I continuously resided with the   |
| decedent in this real property for the one-year period immediat<br>SIGNATURE OF SURVIVING COTENANT   | tely preceding the decede                          | ent's date of death.  |

## THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

TELEPHONE NUMBER



EMAIL ADDRESS