| | OF OF | County of Inyo | |
|--|---|--|-----------------|
| 502-D-R08-0514-14000380-1 502-D (P1) REV. 08 (05-14) | S AUDIN 2 | Dave Stottlemyre, Assessor | |
| CHANGE IN OWNERSHIP STATEMENT DEATH OF REAL PROPERTY OWNER | | P.O. Box J Independence, CA 93526 (760) 878-0302 | |
| This notice is a request for a completed Change in Ownership Statement. Failure to file this statement will result in the assessment of a penalty. | LIFOS P | inyoassessor@inyocounty.us | |
| NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address) | | | |
| Г | Г | | |
| | the perso in each o death. Fi | 480(b) of the Revenue and Taxation Code required onal representative file this statement with the A county where the decedent owned property at the iso a separate statement for each parcel of real pay the decedent. | Asses e time |
| L NAME OF DECEDENT | | DATE OF DEATH | |
| | | | |
| YES NO Did the decedent have an interest in real complete the certification on page 2. STREET ADDRESS OF REAL PROPERTY ICITY | | /? If YES, answer all questions. If NO, sign a | |
| STREET ADDRESS OF REAL PROPERTY | ZIP | ASSESSOR'S PARCEL NUMBER (APN) | |
| | DISPOSITION OF | *If more than 1 parcel, attach separat REAL PROPERTY | e she |
| Copy of deed by which decedent acquired title is attached. | Succession wit | | on |
| Copy of decedent's most recent tax bill is attached. | Probate Code | 13650 distribution pursuant to will | |
| Deed or tax bill is not available; legal description is attache | d. 🗌 Affidavit of dea | th of joint tenant Action of trustee put to terms of a trust | irsua |
| TRANSFER INFORMATION 🗹 Check all that apply and list | t de <mark>ta</mark> ils below. | | |
| Decedent's spouse Decedent's regis | stered domestic partne | er | |
| Decedent's child(ren) or parent(s.) If qualified for exclusion Between Parent and Child must be filed (see instructions). | | Claim for Reassessment Exclusion for Trans | fer |
| Decedent's grandchild(ren.) If qualified for exclusion from a Grandparent to Grandchild must be filed (see instructions). | assess <mark>m</mark> ent, a Claim fo | o <mark>r</mark> Reassessment Exclusion for Transfer from | n |
| Cotenant to cotenant. If qualified for exclusion from assess instructions). | smen <mark>t,</mark> an Affid <mark>avi</mark> t of C | Cotenant Residency must be filed (see | |
| Other beneficiaries or heirs. | | | |
| A trust. | | _ | |
| NAME OF TRUSTEE ADDRESS OF | TRUSTEE | - | |
| List names and percentage of ownership of all beneficiar | ries or heirs: | | |
| | ONSHIP TO DECEDENT | PERCENT OF OWNERSHIP RECEIVED | |
| | | | |
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and Child if appropriate. THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



EF-502-D-R08-0514-14000380-2 BOE-502-D (P2) REV. 08 (05-14)

YES NO Will the decree of distribution include distribution of an ownership interest in any legal entity that owns real property in this county? If **YES**, will the distribution result in any person or legal entity obtaining control of more than 50% of the ownership of that legal entity? YES NO If **YES**, complete the following section.

| NAME AND ADDRESS OF LEGAL ENTITY | | NAME OF PERSON OR ENTITY | GAINING SUC | CH CONTROL | | | |
|---|--|---|--------------------------|-------------------|--|--|--|
| | e decedent the lessor or lessee in a lease that ? If YES , provide the names and addresses of a | | more, incl | uding renewal | | | |
| NAME | MAILING ADDRESS | CITY | STATE | ZIP CODE | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | MAILING ADDRESS FOR FUTURE PROP | ERTY TAX STATEMENTS | | | | | |
| NAME | | | | | | | |
| ADDRESS | СІТҮ | STAT | | E | | | |
| | | | | | | | |
| | CERTIFICATION | | | | | | |
| l certify (or declare) u <mark>nd</mark> ei | r pena <mark>lty</mark> of perju <mark>ry</mark> und <mark>er</mark> the laws of the State (correct and complete to the best of my | | taine <mark>d</mark> her | ein is true, | | | |
| SIGNATURE OF PERSONAL REPRESENT | · · · · · · · · · · · · · · · · · · · | PRINTED NAME OF PERSONAL REPRESENTATIV | 'E | | | | |
| | | | | | | | |
| TITLE | | DATE | | | | | |
| E-MAIL ADDRESS | | DAYTIME TELE | PHONE | | | | |
| | | () | | | | | |
| | INSTRUCTION | <u>6</u> | | | | | |
| | ailure to file a Change in Ownership Statement | within the time prescribed by law m | | | | | |
| | ther \$100 or 10% of the taxes applicable to the | | | | | | |
| | ome, whichever is greater, but not to exceed fiv | | | | | | |
| | pmeowners' exemption or twenty thousand dollar cemption if that failure to file was not willful. Thi | | | | | | |
| | emption in that failure to me was not windi. In Ilected like any other delinquent property taxes | | | | | | |
| Section 480 of the Revenue and | | | o .oop | | | | |
| | hange in ownership of real property or of a manufacti | ured home that is subject to local proper | y taxation a | and is assessed | | | |
| | ansferee shall file a signed change in ownership state | | | | | | |
| located, as provided for in sul statement is required. | odivision (c). In the case of a change in ownership w | here the transferee is not locally assesse | d, no chan | ge in ownership | | | |
| • | shall file a change in ownership statement with the | county recorder or assessor in each cou | intv in whic | h the decedent | | | |
| owned real property at the tin | ne of death that is subject to probate proceedings. T | he statement shall be filed prior to or at | the time th | e inventory and | | | |
| appraisal is filed with the court clerk. In all other cases in which an interest in real property is transferred by reason of death, including a transfer through the medium of a trust, the change in ownership statement or statements shall be filed by the trustee (if the property was held in trust) or the transferee | | | | | | | |
| | ange in ownership statement or statements shall be fill seessor in each county in which the decedent owned | | | | | | |
| | n is required by law. Please reference the following: | | yo alter the | | | | |
| • | 1 3 8 | re offectively on the decodent's date of d | oth Llowo | vor a dogumant | | | |
| must be recorded to vest titl | perty: Beneficial interest passes to the decedent's heir ie in the heirs. An attorney should be consulted to disc | cuss the specific facts of your situation. | | | | | |
| Change in Ownership: Califi shall be "the date of death of the date of death of the date of death of the date | ornia Code of Regulations, Title 18, Rule 462.260(c), f decedent." | states in part that "[i]nheritance (by will c | or intestate | succession)" | | | |
| the personal representative | bate Code, Section 8800, states in part, "Concurrent shall also file a certification that the requirements of s | Section 480 of the Revenue and Taxation | | | | | |
| (2) Have been satisfied by t | use the decedent owned no real property in California he filing of a change in ownership statement with the perty at the time of death." | | nty in Califo | ornia in which | | | |
| • | ent/Grandchild Exclusions: A claim must be filed with | in three years after the date of death/tra | insfer. but r | prior to the date | | | |
| of transfer to a third party; o | br within six months after the date of mailing of a Not is filed. An application may be obtained by calling X | ice of Assessed Value Change, issued a | | | | | |
| Cotenant to cotenant. An after | fidavit must be filed with the county assessor. An affic | avit may be obtained by calling XXX-XX | X-XXXX. | | | | |
| This statement will remain | n confidential as required by Revenue ar | d Tavation Code Section 181 | which ct | ates in part. | | | |

This statement will remain confidential as required by Revenue and Taxation Code Section 481, which states in part: "These statements are not public documents and are not open to inspection, except as provided by Section 408."

