## AFFIDAVIT OF COTENANT RESIDENCY



County of Inyo Dave Stottlemyre, Assessor P.O. Box J Independence, CA 93526 (760) 878-0302 inyoassessor@inyocounty.us

| NAME AND MAILING ADDRESS  |  |
|---|--|
| (Make necessary corrections to the printed name and mailing address)  | -  |
| '<br>   | Under the provisions of Revenue and Taxation Code section<br>62.3, if certain conditions are met, a transfer of a cotenancy<br>interest in real property from one cotenant to the other<br>cotenant that takes effect upon the death of one cotenant is<br>not a change in ownership. This applies to transfers that<br>occur on or after January 1, 2013.                 |
| The change in ownership exclusion for a transfer of an interest in real property be applies as long as all of the following are met:  | etween cotenants that takes effect upon the death of one cotenant  |
| <ul> <li>The transfer is solely by and between two individuals who together own 100</li> <li>As a result of the death of the transferor cotenant, the deceased cotenant's resulting in the surviving cotenant owning 100 percent of the real property, a</li> <li>For the one-year period immediately preceding the death of the transferor of The real property was the principal residence of both cotenants immediately</li> <li>For the one-year period immediately preceding the death of the transferor of The surviving cotenant must sign, under penalty of perjury, an affidavit affirm deceased cotenant for the one-year period immediately preceding the death of the death of the transferor of the surviving cotenant must sign.</li> </ul>   | interest in the real property is transferred to the surviving cotenant,<br>and thereby terminating the cotenancy.<br>otenant, both of the cotenants were owners of record.<br>preceding the transferor cotenant's death.<br>otenant, both of the cotenants continuously resided in the real property.<br>ning that they continuously resided in the real property with the |
| 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   | VU   |
| Property was eligible for:  Homeowners' Exemption Disabled Vete   | erans' Exemption   |
| <ul> <li>Disposition of real property:</li> <li>Affidavit of death of joint tenant</li> <li>Decree of distribution pursuant to will or intestate succession</li> <li>Action of trustee pursuant to terms of trust (Attach a complete copy of the copy</li></ul> | ust and all amendments)  |
| 1. Was this real property the principal residence of the deceased cotenant for the  | one-year period immediately preceding the date of death?  Yes  No  |
| 2. Was this real property the principal residence of the surviving cotenant for the c   | one-year period immediately preceding the date of death? $\square$ Yes $\square$ No  |
| 3. Are there any other beneficiaries of the real property?  |  |
| If yes, please list other beneficiaries:  |  |
| CERTIFICATION OF  | COTENANT   |
| I certify (or declare) under penalty of perjury under the laws of the State of accompanying statements or documents, is true and correct to the best of this real property for the one-year period immediately preceding the decedent's of  | my knowledge and that I continuously resided with the decedent in  |
| SIGNATURE OF SURVIVING COTENANT   | DATE   |

|               | DATE             |
|---------------|------------------|
|               |                  |
| EMAIL ADDRESS | TELEPHONE NUMBER |
|               |                  |

## THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION