EF-58-AH-R18-0617-15000283-1 BOE-58-AH (P1) REV. 18 (06-17)

CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD



Laura Avila Kern County Assessor and Recorder

1115 Truxtun Avenue Bakersfield CA 93301-4639 (661) 868-3485

NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address.)

L		_l						
A. PROPER	TY							
ASSESSOR'S PAR	CEL NUMBER							
PROPERTY ADDRE	ess		CITY					
RECORDER'S DOO	UMENT NUMBER		DATE OF PURCHASE OR TRANSFER					
PROBATE NUMBER	R (if applicable)	DATE OF DEATH (if applicable)	DATE OF DECREE OF DISTRIBUTION (if applicable)					
States Code, tax.] A foreigr Service. The r	section 405(<mark>c)(2</mark>)(C)(i) which autho national who cannot obtain a so umbers are used by the Assessor (rizes the use of social security number						
		ansierors please complete B on the re	everse)					
1. Print full name(s) of transferor(s)								
Social security number(s)								
3. Family	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								
-		<mark>ig exemptio</mark> ns was gra <mark>nte</mark> d or wa <mark>s el</mark> igi	ible to be granted on this property:					
□ Но	☐ Homeowners' Exemption ☐ Disabled Veterans' Exemption							
5. Have	there been other dæ)•-^ls that qua	lified for this exclusion? Á \square Yes \square	No					
Asses	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 principal residence must be identified.)							
6. Was d	6. Was only a partial interest in the property transferred?							
7. Was t	7. Was this property owned in joint tenancy? Yes No							
	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.							
		CERTIFICATION						
accompanying representative value of my pr	n statements or documents, is true of the transferees listed in Secti incipal residence under Revenue a	and correct to the best of my knowled on C. I knowingly am granting this exc nd Taxation Code section 69.5.	at the foregoing and all information hereon, including an Ige and that I am the parent or child (or transferor's lega clusion and will not file a claim to transfer the base yea					
SIGNATURE OF T	RANSFEROR OR LEGAL REPRESENTATIVE	DATE						
SIGNATURE OF T	RANSFEROR OR LEGAL REPRESENTATIVE	PRINTED NAME	DATE					
MAILING ADDRES	S	DAYTIME PHONE NUMBER						
CITY, STATE, ZIP		EMAIL ADDRESS						

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



C. TI	RANSFEREE(S)/BUYER(S) (additional transferees please o	complete "C" below)					
1.	Print full name(s) of transfere	e(s)		-				
2.	Family relationship(s) to transferor(s)							
	If adopted, age at time of adoption							
	estic partnership (registered means \square Yes \square No							
	If no , was the marriage or reg	no, was the marriage or registered domestic partnership terminated by: \Box Death \Box Divorce/Termination of partnership						
	If terminated by death, had the surviving stepparent remarried or entered into a registered domestic partnership as of the date of purc or transfer? \square Yes \square No							
	If in-law relationship is involved, was the son-in-law or daughter-in-law still married to or in a registered domestic partnership will daughter or son on the date of purchase or transfer? \Box Yes \Box No							
	If no , was the marriage or reg	no, was the marriage or registered domestic partnership terminated by: Death Divorce/Termination of partnership						
	If terminated by death, had the the date of purchase or trans		ghter-in-law remarrie	d or entered into a re	egistered d <mark>omest</mark> ic partnership as o			
3.	ALLOCATION OF EXCLUSION transferee must specify on an	ON (If the full cash value of the attachment to this claim the a	e real property tra <mark>ns</mark> f amount and alloc <mark>ati</mark> o	err <mark>ed</mark> exceeds the or n of the exclusion tha	ne mi <mark>llion dollar va</mark> lue exclusion, the at is being sought.)			
		CEI	RTIFICATION					
accom represe the Re	panying statements or docume	ents, is true and correct to the ed in Section B; and that all of	best of my knowledge	ge and that I am the eligible transferees w	all information hereon, including any parent or child (or transferee's legal ithin the meaning of section 63.1 or			
SIGNATO	JRE OF TRANSFEREE OR LEGAL REP	RESENTATIVE PRINTED NAME		DATE				
MAILING	GADDRESS			DAYTIME PHONE N	UMBER			
CITY, ST.	ATE, ZIP			EMAIL ADDRESS				
Note:	The Assessor may contact you	for additional information.						
		B. ADDITIONAL TRANSI	FEROR(S)/SELLER	(S) (continued)				
	NAME	SOCIAL SECURITY NUME	BER SIG	GNATURE	RELATIONSHIP			
		C. ADDITIONAL TRANS	FEREE(S)/BUYER(S) (continued)				
		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;
- 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. California law 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 one-time 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.

