| 58-H-R01-1212-26000268-1 -58-H REV. 01 (12/12) AFFIDAVIT OF COTENANT RESIDENCY | COUNTY OF MORE | Mono County Office Of The Assesso Barry Beck, Assessor PO Box 456 Bridgeport, CA 93517-0456 Telephone: 760-932-5510 Fax: 760-932-5511 Email: assessor@mono.ca.gov Website: www.monocounty.ca.gov/assessor |
|--|--|--|
| NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address) | | |
| | 62.3, if certai interest in re cotenant tha not a change | ovisions of Revenue and Taxation Code section n conditions are met, a transfer of a cotenancy al property from one cotenant to the other t takes effect upon the death of one cotenant is in ownership. This applies to transfers that after January 1, 2013. |
| _ | _ | |
| The change in ownership exclusion for a transfer of an interest in real papplies as long as all of the following are met: The transfer is solely by and between two individuals who togethe As a result of the death of the transferor cotenant, the deceased c resulting in the surviving cotenant owning 100 percent of the real p For the one-year period immediately preceding the death of the transferor the one-year period immediately preceding the death of the transferor. The real property was the principal residence of both cotenants im For the one-year period immediately preceding the death of the transferor. The surviving cotenant must sign, under penalty of perjury, an affice deceased cotenant for the one-year period immediately preceding. | r own 100 percent of the re- otenant's interest in the real property, and thereby termin ansferor cotenant, both of the mediately preceding the tra- ansferor cotenant, both of the davit affirming that he or she | al property in joint tenancy or tenancy in common. property is transferred to the surviving cotenant, nating the cotenancy. The cotenants were owners of record. ansferor cotenant's death. The cotenants continuously resided in the real property |
| NAME OF DECEASED COTENANT | | DATE OF DEATH |
| STREET ADDRESS OF REAL PROPERTY CITY, STATE, ZIP CODE | | ASSESSOR'S PARCEL NUMBER (APN) |
| | | |
| Property was eligible for: Homeowners' Exemption Disa Disposition of real property: Affidavit of death of joint tenant Decree of distribution pursuant to will or intestate succession Action of trustee pursuant to terms of trust (Attach a complete | abled Veterans' Exemption | lment <mark>s</mark>) |
| 1. Was this real property the principal residence of the deceased cotena | int the one-year period prior | r to the date of death? |
| | | |
| 2. Was this real property the principal residence of the surviving cotenar | | |
| , | No | |
| If yes, please list other beneficiaries: | | |
| I certify (or declare) under penalty of perjury under the laws of the any accompanying statements or documents, is true and correct to decedent in this real property for the one-year period immediately | the best of my knowled | e foregoing and all information hereon, including ge and that I continuously resided with the |
| SIGNATURE OF SURVIVING COTENANT | | DATE |
| EMAIL ADDRESS | | TELEPHONE NUMBER |

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

