## EF-19-C-R01-0522-52000189-1

## BOE-19-C (P1) REV. 01 (05-22) CERTIFICATION OF VALUE BY ASSESSOR FOR **BASE YEAR VALUE TRANSFER**



County Assessor

Address

City, State, Zip

Replacement Residence APN \_

Section 2.1(b) of article XIII A of the California Constitution, implemented by Revenue and Taxation Code section 69.6, allows a homeowner who is at least age 55 or severely and permanently disabled or a victim of a wildfire or natural disaster to transfer their base year value from an original primary residence to a replacement primary residence located anywhere in California. An application for a base year value transfer to a replacement primary residence has been filed with the \_\_\_\_\_\_ County Assessor's Office. Since the claim involves the transfer of a base year value from an original primary residence has been filed with the \_\_\_\_\_\_ County Assessor's Office. original primary residence located in County, we are requesting the following information from your office.

Please complete Section B of this form and return it to our office at the address above.

Application Date:         State Address of Property Sold:         County:       Assessor's FittbeetD Member         Sale Address of Property Sold:       Date of Suley         Sale Price:       Date of Suley         Date of Sale Price:       Date of Saley         B. REQUESTED INFORMATION       Confirmation of Date of Sale:         Confirmation of Sale Price:       Date of Recording:         Total Information of Sale Price:       Date of Recording:         Total Land FAVX \$       Land Base Year:         Fair Markot Value at Timo of Sale:       Sing Orgeneration         Sale Address Counter Number:       Land Base Year:         Fair Markot Value at Timo of Sale:       Sing Orgeneration         Sale and FAVX \$       Table Improvement FAV         Was entrice property used as a primary residence?       Intro of Sale:         Sing Orgeneration       Sing Orgeneration         Was the property algobie for exemption?       Yes       No         For the applicant, has your county previousling and a base year wate formation of base of desater(? 1 and call Al (Prop 19)?       Proceediment PAV         Yes       No       If was of desater(? 1 and call Al (Prop 19)?         Park Lattac Value immediately prior to the addres of solution?       The interview of addres of the applicable.         Order the applicand	A. ORIGINAL PRIMARY RESIDENCE (INFO	RMATION TH	IAT W	AS PROVIE	DED	TO THE ASSESS	OR BY TH	HE CLAIMANT)	
County:       Assessor's PaircalID Mumber:         Sale Price:       Date of Sale:         B, REQUESTED INFORMATION       Confirmation of Date of Sale:         Confirmation of Sale Price:       Confirmation of Date of Sale:         Recorder's Document Number:       Date of Recording:         Total Land FBVV (prior to sale): \$       Land Base Year:         Total Land FBVV (\$)       Introd Base Year:         Total Land FBVV (\$)       Total Miniprovement FBVV.\$         Total Land FBVV (\$)       Introd Base Year:         Fair Markot Value at Time of Sale:       Total Improvement FBVV.\$         S       Total Improvement Year         Yeas entire property used as a primary residence?       Yes         No       Property description, if other than primary residence:         If no, FMV allocated to primary residence?       Yes         No       If no, the reserving county must request proof or readency from the climant.         Did the applicant, has your county previously granted a base year value transfer (nor age an disability paraamine to Section 2.1 article XIII A (Prop 19)?         Prios       No       If no, the recerving county must request proof or readency from the climant.         Did the applicant, has your county previously granted a base year value transfer (nor age an disability paraamine to Section 2.1 article XIII A (Prop 19)?         Prior No       Yes <th colspan="4">Applicant Name:</th> <th colspan="4">plication Date:</th>	Applicant Name:				plication Date:				
Sale Price:       Date of Sale;         B. REQUESTED INFORMATION       Confirmation of Date of Sale;         Confirmation of Sale Price:       Confirmation of Date of Sale;         Recorder's Document Number:       Date of Recording;         Total Property FBYU (prior to stelp); \$       Sale Price:         Total Property FBYU (prior to stelp); \$       Land Base Year:         Total Land FBYV; \$       Land Base Year:         Total Land Property Base You at Time of Sale;       Impl Base Year:         Sale And Value; \$       Total Improvement/FBVV; \$       Impl Base Year:         Sale and Property description.       Total Improvement/FBVU; \$       Impl Base Year:         Sale and Property description.       Total Improvement/FMV       \$         Sale and property description.       Total Improvement/FMV       \$         Was enter property description.       Total Improvement/FMV       \$         Was enter property description.       No       If no, FMV allocated to primary residence:       Impl Base Year:         If no, FMV allocated to primary residence:       Land CMV       \$       No         For this applicant, name appear as an assessee immediately prior to the abse year value transfer for age of disability pursuant to Sector 2.1 anticle XII A (Prop 19)?       Yes       No         Fait Market Value (prior to disaster):       \$	Situs Address of Property Sold:				ity:				
B. REQUESTED INFORMATION Confirmation of Date of Sale: Recorder's Document Number: Confirmation of Date of Sale: Recorder's Document Number: Confirmation of Date of Recording: Confirmation of Date of Recording: Confirmation of Date of Recording: Confirmation of Sale: Recorder's Document Number: Confirmation of Sale: Recorder's Document FRVV \$ Land Base Year: Confirmation of Sale: Recorder's Document RetryV. \$ Confirmation of Sale: Recorder's Document Retry Confirmation of Decomposition of the record retrievent Value: \$ Confirmation of Confirmation	County:				Assessor's Parcel/ID Number:				
Confirmation of Date of Sale Proce:       Confirmation of Date of Sale:         Recorder's Document Number:       Date of Recording:         Total Property FBVV (prior to state): \$       Roll Year (year-year);         Total Land FBVV: \$       Imp Base Year:         Fair Market Value at Time of Sale:       Imp Base Year (attach explanation)         \$       Total Improvement FBVV: \$       Imp Base Year (attach explanation)         \$       Total Improvement Value: \$       Multiple Base Year (attach explanation)         \$       Total Improvement Value: \$       Imp Base Year (attach explanation)         \$       Total Improvement Value: \$       Imp Base Year (attach explanation)         \$       Total Improvement Value: \$       Imp Base Year (attach explanation)         \$       Total Improvement Value: \$       Imp Base Year (attach explanation)         \$       Total Improvement Value: \$       Imp Base Year (attach explanation)         \$       Total Improvement Value: \$       Imp Base Year (attach explanation)         \$       Value       No       If no, the receiving county must request proof of residency from the claimant.         Did the applicants name appear as an assessee immediately pror to the above referenced transfer?       Yes       No         For this applicant, has your county previously granted a base year value forins for age or disability pursuant to Section? <th>Sale Price:</th> <th></th> <th></th> <th>Dat</th> <th>e of Sa</th> <th>ale:</th> <th></th> <th>A</th>	Sale Price:			Dat	e of Sa	ale:		A	
Recorder's Document Number:       Date of Recording:         Total Property FBYV (prior to side): \$       Roll Year (year-year)?         Total Land FBYV/: \$       Land Base Year:       Total Improvement FBVV: \$       ImprBase Year:         Fair Market Value at Time of Sale:       Intel Improvement Value: \$       ImprBase Year:       ImprBase Year:         Total Land Value: \$       Total Improvement Value: \$       ImprBase Year:       ImprBase Year:         Total Land Value: \$       Total Improvement Value: \$       ImprBase Year:       ImprBase Year:         Yeas entire property used as a primary residence:       Yeas       No       Property description, if other than primary residence:         If no, FMV allocated to primary residence:       Land FMV       ImprGase Year       \$         Was the property eligible for exemption?       Yes       No       If no, the receiving county must request proof of residency from the claimant.         Did the applicants name appear as an assessee immediately prior to the above-referenced transfer?       Yes       No         For this applicant, has your county previously granted a base year value france for any of description in the daward disaster?       Yes       No         Fair Market Value immediately prior to disaster?       Pactored Base Year Value (prior to disaster)?       Was the property subtantially damaged or destroyed by a load of disaster?       No       No <tr< th=""><th>B. REQUESTED INFORMATION</th><th></th><th></th><th></th><th></th><th></th><th>_</th><th></th></tr<>	B. REQUESTED INFORMATION						_		
Total Property FBYV (prior to safe): \$       Roll Year (year-year);         Total Land FBYV: \$       Intro Base Year:       Total Improvement FBVV: \$       Imp Base Year:         Fair Market Value at Time of Sale: \$       Improvement Value: \$       Improvement Value: \$         Total Land Value: \$       Total Improvement Value: \$       Improvement Value: \$         Total Land Value: \$       Improvement Value: \$       Improvement Value: \$         Was entire property used as a primary residence:       Land #Mv       Improvement Value: \$         If no, FMV allocated to primary residence:       Land #Mv       Improvement FMV         \$       \$       \$       No         If no, the receiving county must request proof of residency form the claimant.       Did the applicant; name appear as an assessee immediately prior to the above-referenced transfer?       Yes       No         For this applicant, has your county previously granted a base year value transfer for age to disability previously transmode of active to the above-referenced transfer?       Yes       No         For this applicant, has your county previously granted a base year value transfer for age to disability previously transmode of destryed by a       Date of disaster (if applicable):       No         For this applicant what the date of excluder?       Yes       No       Mase property sold in Its damaged state?       Yes (in No         Fair Market Value immediately prior to	Confirmation of Sale Price:	_		Cor	ifirmati	ion of Date of Sale:			
Total Land FBYV: \$       Land Base Year:       fotal Improvement FBYV: \$       Imp Base Year:         Fair Market Value at Time of Sale:	Recorder's Document Number:			Dat	e of R	ecording:			
Fair Market Value at Time of Sale:       Multiple Base Year (attach explanation)         Total Land Value: \$       Total Improvement Value: \$         Was entire property used as a primary residence?       Yes       No         Property description, if other than primary residence:       Improvement Value: \$         Was the property eligible for exemption?       Yes       No         Port this applicant's name appear as an assessee immediately prior to the above-referenced transfer?       Yes       No         For this applicant, has your county previously granted a base year value transfer for age or disability pursuant to Section 2.1 atrice XII A (Prop 19)?       Yes       No         PrinterNamediately prior to the above-referenced transfer?       Yes       No         Fair Market Value immediately prior to disaster (if applicable):       Type of disaster (if applicable):       Was the property sold in its darnaged state?         Yes       No       Factored Base Year Value (prior to disaster):       \$       Improvement Factored Base Year Value (prior to disaster):       Yes       No         Fair Market Value immediately prior to the above-referenced transfer?       Yes       No       Yes       No         Fair Market Value immediately prior to disaster:       Factored Base Year Value (prior to disaster): \$       Type of disaster (if applicable):       Was the property sold in its darnaged state?       Yes       No	Total Property FBYV (prior to sale): \$			Roll	Year	(year-yea <mark>r):</mark>			
\$       Induppe base Year (attach explanation)         Total Land Value: \$       Total Improvement Value: \$         Was entire property used as a primary residence:       Yes       No         If no, FMV allocated to primary residence:       Land FMV       Improvement FMV         \$       \$       \$         Was the property eligible for exemption?       Yes       No         If the applicant's name appear as an assessee immediately prior to the above-referenced transfer?       Yes       No         For this applicant, has your county previously granted a base year value transfer for age or disability pursuant to Section 2.1 article XIII A (Prop 19)?       Yes       No         For this applicant, has your county previously granted a base year value transfer for age or disability pursuant to Section 2.1 article XIII A (Prop 19)?       Yes       No         For this applicant disaster?       Yes       No       Property substantially damaged or destroyed by a load or disaster?       Type of disaster (if applicable): Was the property solid in its damaged state?       Yes       No         Fair Market Value (prior to disaster):       \$       Improvement Factored Base Year Value (prior to disaster): \$       No         Land Factored Base Year Value (prior to disaster):       \$       Improvement Factored Base Year Value (prior to disaster): \$	Total Land FBYV: \$	Land Base Year:		Total Impre	oveme	ent FBYV: <b>\$</b>		Imp Base Year:	
Was entire property used as a primary residence?       Yes       No       Property description, if other than primary residence:         If no, FMV allocated to primary residence:       Land FMV       \$       \$         Was the property eligible for exemption?       Yes       No       If no, the receiving county must request proof of residency from the claimant.         Did the applicant's name appear as an assessee immediately prior to the above-referenced transfer?       Yes       No         For this applicant, has your county previously granted a base year value transfer for age or disability pursuant to Section 2.1 article XIII A (Prop 19)?       Yes       No         For this applicant, has your county previously granted a base year value fransfer for age or disability pursuant to Section 2.1 article XIII A (Prop 19)?       Yes       No         For this applicant, has your county previously granted a base year value fransfer for whitch The GOVERNOR DECLARED A STATE OF EMERGENCY         Was property substantially damaged or destroyed by a Governor-proclaimed disaster?       Yes       No         Factored Base Year Value (prior to disaster):       \$       Improvement Factored Base Year Value (prior to disaster):       Was the property eligible for exemption?       Yes       No         Factored Base Year Value (prior to disaster):       \$       Improvement Factored Base Year Value (prior to disaster):       \$         Mas the property eligible for exemption?       Yes       No       <							Multi	ple Base Year (attach explanation)	
If no, FMV allocated to primary residence:       Land FMV       Improvement FMV         Was the property eligible for exemption?       Yes       No       If no, the receiving county must request proof of residency from the claimant.         Did the applicant's name appear as an assessee immediately prior to the above-referenced transfer?       Yes       No         For this applicant, has your county previously granted a base year value fransfer for age or disability pursuant to Section 2.1 article XIII A (Prop 19)?       Yes       No         PRINCIPAL RESIDENCE SUBSTANTIALLY DAMAGED/DESTROYED BY DISASTER FOR WHICH THE GOVERNOR DECLARED A STATE OF EMERGENCY       Was the property sold in its damaged or descusion?         Was property substantially duraged or descusion?	Total Land Value: \$			Tota	l Impr	ovement Value: \$			
S   Was the property eligible for exemption?   Yes   No   If no, the receiving county must request proof of residency from the claimant.   Did the applicant's name appear as an assesse immediately prior to the above-referenced transfer?   Yes   No   For this applicant, has your county previously granted a base year value transfer for age or disability pursuant to Section 2.1 article XIII A (Prop 19)?   Yes   No   For this applicant, has your county previously granted a base year value transfer for age or disability pursuant to Section 2.1 article XIII A (Prop 19)?   Yes   No   If yes, what is the date of exclusion?	Was entire property used as a primary residence?       Yes       No       Property description, if other than primary residence:								
Did the applicant's name appear as an assessee immediately prior to the above-referenced transfer?       Yes       No         For this applicant, has your county previously granted a base year value transfer for age or disability pursuant to Section 2.1 article XIII A (Prop 19)?       Yes       No       If yes, what is the date of exclusion?       PRINCIPAL RESIDENCE SUBSTANTIALLY DAMAGED/DESTROYED BY DISASTER FOR WHICH THE GOVERNOR DECLARED A STATE OF EMERGENCY         Was property substantially damaged or destroyed by a Governor-proclaimed disaster?       Yes       No       If yes, what is the date of exclusion?         Fair Market Value immediately prior to disaster:       Factored Base Year Value (prior to disaster):       Roll Year (year-year):       S         Land Factored Base Year Value (prior to disaster):       \$       Improvement Factored Base Year Value (prior to disaster): \$       No         Vas the property eligible for exemption?       Yes       No       If no, the receiving county must request proof of residency from the claimant.         Did the applicant's name appear as an assessee immediately prior to the above-referenced transfer?       Yes       No         CERTIFICATION OF VALUE REQUESTED BY:         Name of Contact:       Email Address:       Phone Number:         County Assessor's Office:       Phone Number:       Phone Number:	in no, i my allocated to plinary reelacited.	and FMV			V	Improve \$	ement FMV		
For this applicant, has your county previously granted a base year value transfer for age or disability pursuant to Section 2.1 article XIII A (Prop 19)?         Yes       No       If yes, what is the date of exclusion?         PRINCIPAL RESIDENCE SUBSTANTIALLY DAMAGED/DESTROYED BY DISASTER FOR WHICH THE GOVERNOR DECLARED A STATE OF EMERGENCY         Was property substantially damaged or destroyed by a Governor-proclaimed disaster?       Date of disaster (if applicable);       Type of disaster (if applicable);       Was the property sold in its damaged state?         Fair Market Value immediately prior to disaster:       Factored Base Year Value (prior to disaster);       Roll Year (year-year);       \$         Land Factored Base Year Value (prior to disaster);       \$       Improvement Factored Base Year Value (prior to disaster); \$         Was the property eligible for exemption?       Yes       No       If no, the receiving county must request proof of residency from the claimant.         Did the applicant's name appear as an assessee immediately prior to the above-referenced transfer?       Yes       No         CERTIFICATION OF VALUE REQUESTED BY:       Email Address:       Certification Of VALUE REQUESTED BY:         Name of Contact:       Email Address:       Phone Number:         Mare of Contact:       Email Address:       Phone Number:	Was the property eligible for exemption? Yes	No If no,	the rec	eiving county	must r	equest proof of reside	ncy from the	e claimant.	
Yes       No       If yes, what is the date of exclusion?         PRINCIPAL RESIDENCE SUBSTANTIALLY DAMAGED/DESTROYED BY DISASTER FOR WHICH THE GOVERNOR DECLARED A STATE OF EMERGENCY         Was property substantially damaged or destroyed by a       Date of disaster (if applicable):       Type of disaster (if applicable):       Was the property sold in its damaged state?       Yes       No         Fair Market Value immediately prior to disaster:       Factored Base Year Value (prior to disaster):       Roll Year (year-year):       \$       \$         Land Factored Base Year Value (prior to disaster):       \$       Improvement Factored Base Year Value (prior to disaster): \$       Was the property eligible for exemption?       Yes       No         Did the applicant's name appear as an assessee immediately prior to the above-referenced transfer?       Yes       No         Name of Contact:       Email Address:       Email Address:         County Assessor's Office:       Phone Number:       Phone Number:	Did the applicant's name appear as an assessee immedi	ately prior to the a	above-re	eferenced tran	sfer?	Yes No			
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Governor-proclaimed disaster?       Yes       No       Amaged state?       Yes       No         Fair Market Value immediately prior to disaster:       Factored Base Year Value (prior to disaster):       Roll Year (year-year):       Improvement Factored Base Year Value (prior to disaster):       No         Land Factored Base Year Value (prior to disaster):       Improvement Factored Base Year Value (prior to di									
\$     Land Factored Base Year Value (prior to disaster): \$     Was the property eligible for exemption?     Yes     No        If no, the receiving county must request proof of residency from the claimant.     Did the applicant's name appear as an assessee immediately prior to the above-referenced transfer?     Yes     Name of Contact:     CERTIFICATION OF VALUE PROVIDED BY:     Name of Contact:     Certification of Value Requested By:     Name of Contact:     Phone Number:     Name of Contact:     Phone Number:     Phone Number:     Phone Number:						Type of disaster (if a	pplicable):		
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Did the applicant's name appear as an assessee immediately prior to the above-referenced transfer?       Yes       No         CERTIFICATION OF VALUE PROVIDED BY:         Name of Contact:       Email Address:         County Assessor's Office:       Phone Number:         CERTIFICATION OF VALUE REQUESTED BY:         Name of Contact:       Email Address:         Phone Number:       Phone Number:         Phone Output       Phone Number:         Phone Number:       Phone Number:         Phone Number:       Phone Number:	▼				t Factored Base Year Value (prior to disaster): \$				
CERTIFICATION OF VALUE PROVIDED BY:         Name of Contact:       Email Address:         County Assessor's Office:       Phone Number:         CERTIFICATION OF VALUE REQUESTED BY:       Phone Number:         Name of Contact:       Email Address:         Name of Contact:       Email Address:       Phone Number:	Was the property eligible for exemption?	No If no	, the re	ceiving county	must	request proof of reside	ency from th	ne claimant.	
Name of Contact:     Email Address:       County Assessor's Office:     Phone Number:       CERTIFICATION OF VALUE REQUESTED BY:       Name of Contact:     Email Address:	Did the applicant's name appear as an assessee immed	liately prior to the	above-r	eferenced trar	nsfer?	Yes No	D		
County Assessor's Office:	CERTIFICATION OF VALU								
CERTIFICATION OF VALUE REQUESTED BY:         Name of Contact:       Email Address:       Phone Number:	Name of Contact.				Emai	I Address:			
Name of Contact:     Email Address:     Phone Number:	County Assessor's Office:								
	Name of Contact: Email Address:			ldress:	Phone Number:				
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Kenneth L. Brown **County of Tehama Assessor** 444 Oak Street - Room B P. O. Box 428 Red Bluff, CA 96080 (530) 527-5931 Fax (530) 529-4019