	ANA CO	Kenneth L. Brown
58-AH-R21-0522-52000169-1 -58-AH (P1) REV. 21 (05-22)		County of Tehama Assessor 444 Oak Street - Room B P. O. Box 428
AIM FOR REASSESSMENT EXCLUSION ANSFER BETWEEN PARENT AND CHILI		P. O. Box 428 Red Bluff, CA 96080 (530) 527-5931 Fax (530) 529-4019
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name	o and mailing address)	
L		
A. PROPERTY		_
ASSESSOR'S PARCEL/ID NUMBER		
PROPERTY ADDRESS		CITY DATE OF PURCHASE OR TRANSFER
RECORDER'S DOCUMENT NUMBER		DATE OF FURCHASE OR TRANSFER
PROBATE NUMBER (if applicable)	DATE OF DEATH (if applicable)	DATE OF DECREE OF DISTRIBUTION (if applicable)
Service. The numbers are used by the Assessor a B. TRANSFEROR(S)/SELLER(S) (additional tra		e reverse)
1. Print full name(s) of transferor(s)		
2. Social security number(s)		
3. Family relationship(s) to transferee(s)		
If adopted, age at time of adoption		
4. Was this property the transferor's principal r		
If yes , please check which of the following e		be granted on this property:
□ Homeowners' Exemption □ Disabled V		
5. Have there been other transfers that qualifie		
		is list should include for each property: the County uyers, and family relationship. Transferor's princi
6. Was only a partial interest in the property tra	ansferred? 🗌 Yes 🗌 No If yes, perce	entage transferred %
7. Was this property owned in joint tenancy?		
IMPORTANT: If the transfer was through the n or trust and all amendments.	nedium of a will and/or trust, you must	attach a full and complete copy of the will and
Leartify (or dealars) under persity of parium under	CERTIFICATION	as foregoing and all information bergan including
accompanying statements or documents, is true representative) of the transferees listed in Section	and correct to the best of my knowledge a C. I knowingly am granting this exclusion	ne foregoing and all information hereon, including a and that I am the parent or child (or transferor's le and will not file a claim to transfer the base year va
of my principal residence under Revenue and Taxis SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	ation Code section 69.5. PRINTED NAME	DATE
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	PRINTED NAME	DATE
MAILING ADDRESS	1	DAYTIME PHONE NUMBER ()
CITY, STATE, ZIP		EMAIL ADDRESS

CITY, STATE, ZIP

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



C. TR	ANSFEREE(S)/BUYER(S) (a	dditional transferees please complet	e Section E below)			
1.	Print full name(s) of transfere	e(s)				
2.	Family relationship(s) to transferor(s)					
	If adopted, age at time of ado	ption				
		onship is involved, was parent still Secretary of State) with stepparent (estic partnership <i>(registered means</i> ? □ Yes □ No		
	If no , was the marriage or registered domestic partnership terminated by: If terminated by death, had the surviving stepparent remarried or entered into a registered domestic partnership as of the date of purch or transfer? Yes No					
	If in-law relationship is involved, was the child-in-law still married to or in a registered domestic partnership with the child on the date of purchase or transfer? 🛛 Yes 🗋 No					
	If no , was the m <mark>arriage or re</mark>	pistered domestic partnership termin	ated by: 🗌 Death 🔲 Divorce/	Termination of partnership		
	If terminated by death, had the surviving child-in-law remarried or entered into a registered domestic partnership as of the date of purchas or transfer? 🔲 Yes 🗌 No					
3.		ON (If the full cash value of the real attachme <mark>nt</mark> to th <mark>is</mark> claim the amour				
		CERTIFIC	ATION			
accom repres the Re	panying statements or docume	perjury under the laws of the State of ents, is true and correct to the best of ed in Section B; and that all of the transmission RESENTATIVE PRINTED NAME	of my knowledg <mark>e and th</mark> at I am the	parent or child (or transferee's legal		
MAILING	GADDRESS		DAYTIME PHONE N	IUMBER		
CITY, ST	TATE, ZIP		EMAIL ADDRESS			
Note:	The Assessor may contact you	for additional information.				
D. AD	DITIONAL TRANSFEROR(S)	SELLER(S)				
	NAME	SOCIAL SECURITY NUMBER	SIGNATURE	RELATIONSHIP		

NAME	SOCIAL SECURITY NUMBER	SIGNATURE	RELATIONSHIP

E. ADDITIONAL TRANSFEREE(S)/BUYER(S)

NAME	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 and on or before February 15, 2021.
- 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. Revenue and Taxation Code section 63.1 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 onetime 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.

For transfers occurring on or after February 16, 2021, please file form BOE-19-P, Claim for Reassessment Exclusion for Transfer Between Parent and Child Occurring on or After February 16, 2021.

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