CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD

NAME AND MAILING ADDRESS (Make necessary corrections to the printed nam	ne and mailing address.)		
L			
A. PROPERTY			
ASSESSOR'S PARCEL/ID NUMBER			
PROPERTY ADDRESS		LOITY	
-NOPENT ADDICES		CITY	
RECORDER'S DOCUMENT NUMBER		DATE OF PURCHASE OR TRANSFER	
PROBATE NUMBER (if applicable)	DATE OF DEATH (if applicable)	DATE OF DECREE OF DISTRIBUTION (if applicable)	
States Code, section 405(c)(2)(C)(i) which author tax.] A foreign national who cannot obtain a so Service. The numbers are used by the Assessor	orizes the use of social security numbers for ocial security number may provide a tax ide and the state to monitor the exclusion limit.	Taxation Code section 63.1. [See Title 42 United identification purposes in the administration of any ntification number issued by the Internal Revenue	
B. TRANSFEROR(S)/SELLER(S) (additional tr	ransferors please complete Section D on the	reverse)	
Print full name(s) of transferor(s)			
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			
• • •	exemptions was granted or was eligible to be	e granted on this property:	
☐ Homeowners' Exemption ☐ Disabled	·		
5. Have there been other transfers that qualifi			
		list should include for each property: the County, vers, and family relationship. Transferor's principal	
6. Was only a partial interest in the property to	ransferred? \square Yes \square No If yes , percen	tage transferred %	
7. Was this property owned in joint tenancy?	☐ Yes ☐ No		
	medium of a will and/or trust, you must at	ttach a full and complete copy of the will and/or	
trust and all amendments.	CERTIFICATION		
I certify (or declare) under penalty of periury und	CERTIFICATION er the laws of the State of California that the	foregoing and all information hereon, including any	
accompanying statements or documents, is true	and correct to the best of my knowledge ann C. I knowingly am granting this exclusion an	d that I am the parent or child (or transferor's legal and will not file a claim to transfer the base year value	
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	PRINTED NAME	DATE	
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	PRINTED NAME	DATE	
MAILING ADDRESS	-	DAYTIME PHONE NUMBER	
CITY, STATE, ZIP		() EMAIL ADDRESS	
o, o			

(Please complete applicable information on reverse side.)

	Print full name(s) of transfere	ee(s)					
2.	Family relationship(s) to transferor(s)						
	If stepparent/stepchild relationship is involved, was parent still married to or in a registered domestic partnership (registered means registered with the California Secretary of State) with stepparent on the date of purchase or transfer? \Box Yes \Box 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 purchase or transfer?						
3.	 ALLOCATION OF EXCLUSION (If the full cash value of the real property transferred exceeds the one million dollar value exclusion transferee must specify on an attachment to this claim the amount and allocation of the exclusion that is being sought.) 						
		CERTI	FICATION				
repres the Re	sentative) of the transferors list evenue and Taxation Code.	ents, is true and correct to the be ed in Section B; and that all of the RESENTATIVE PRINTED NAME					
SIGNATURE OF TRANSFEREE OR LEGAL REPRESENTATIVE PRINTED NAME							
MAILING ADDRESS DAYTIME PHONE NUMBER OF THE PHONE					BER		
CITY, STATE, ZIP EMAIL ADI					MAIL ADDRESS		
Note:	The Assessor may contact you	ı for additional information.		1			
D. AD	DITIONAL TRANSFEROR(S)	/SELLER(S)					
D. AD	DDITIONAL TRANSFEROR(S) NAME	SOCIAL SECURITY NUMBER	R SIGNAT	URE	RELATIONSHIP		
D. AD			R SIGNAT	URE	RELATIONSHIP		
D. AD			R SIGNAT	URE	RELATIONSHIP		
D. AD			R SIGNAT	URE	RELATIONSHIP		
<u>D. AD</u>			R SIGNAT	URE	RELATIONSHIP		
		SOCIAL SECURITY NUMBER	R SIGNAT	URE	RELATIONSHIP		
	NAME	SOCIAL SECURITY NUMBER	R SIGNAT	URE	RELATIONSHIP		
	NAME	SOCIAL SECURITY NUMBER	R SIGNAT	URE			
	NAME	SOCIAL SECURITY NUMBER	R SIGNAT	URE			
	NAME	SOCIAL SECURITY NUMBER	R SIGNAT	ÜRE			
	NAME	SOCIAL SECURITY NUMBER	R SIGNAT	URE			

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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 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

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.