# CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD



Gus Kramer County Assessor 2530 Arnold Drive, Suite 100 Martinez, CA 94553-4359 FAX: (925) 313-7488 Telephone: (925) 313-7400 http://www.cccounty.us/assessor

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

L		
A. PROPERTY		
ASSESSOR'S PARCEL NUMBER		
PROPERTY ADDRESS		CITY
RECORDER'S DOCUMENT NUMBER		DATE OF PURCHASE OR TRANSFER
PROBATE NUMBER (if applicable)	ATE OF DEATH (if applicable)	DATE OF DECREE OF DISTRIBUTION (if applicable)
States Code, section 405(c)(2)(C)(i) which author	izes the use of social security numbers for i ial security number may provide a tax iden	<b>axation Code section 63.1.</b> [See Title 42 United dentification purposes in the administration of any tification number issued by the Internal Revenue
B. TRANSFEROR(S)/SELLER(S) (additional tra	nsferors please complete Section D on the r	everse)
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	esidence? 🗌 Yes 🗌 No	
If <b>yes</b> , please check which of the following e	exemptions was granted or was eligible to be	granted on this property:
$\Box$ Homeowners' Exemption $\Box$ Disabled V	eterans' Exemption	
5. Have there been other transfers that qualifie	ed for this exclusion? $\Box$ Yes $\Box$ No	
		ist should include for each property: the County, As- d family relationship. Transferor's principal residence
6. Was only a partial interest in the property tra	ansferred? $\Box$ Yes $\Box$ No $$ If yes, percenta	age transferred %
7. Was this property owned in joint tenancy?		
<b>IMPORTANT:</b> If the transfer was through the n trust and all amendments.	nedium of a will and/or trust, you must att	ach a full and complete copy of the will and/or
	CERTIFICATION	
accompanying statements or documents, is true a	and correct to the best of my knowledge and C. I knowingly am granting this exclusion and	pregoing and all information hereon, including any that I am the parent or child (or transferor's legal will not file a claim to transfer the base year value
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE		DATE
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	PRINTED NAME	ATE
MAILING ADDRESS		DAYTIME PHONE NUMBER
CITY, STATE, ZIP	1	( ) MAIL ADDRESS
(Please c	omplete applicable information on reve	erse side )
	IENT IS NOT SUBJECT TO PUBLIC	



C.	T	TRANSFEREE(S)/BUYER(S) (additional transferees please complete Section E below)		
	1.	Print full name(s) of transferee(s)		
	2.	Family relationship(s) to transferor(s)		
		If adopted, age at time of adoption		
If stepparent/stepchild relationship is involved, was parent still married to or in a registered domestic partnership (registered r registered with the California Secretary of State) with stepparent on the date of purchase or transfer? $\Box$ Yes $\Box$ No				
		If <b>no,</b> was the marriage or registered domestic partnership terminated by: 🛛 Death 🖓 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 purchase or transfer? $\Box$ Yes $\Box$ 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? $\Box$ Yes $\Box$ No		
		If <b>no,</b> was the marriage or registered domestic partnership terminated 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 purchase or transfer? $\Box$ Yes $\Box$ No		
	3	ALLOCATION OF EXCLUSION (If the full cash value of the real property transferred exceeds the one million dollar value exclusion, the		

3. ALLOCATION OF EXCLUSION (If the full cash value of the real property transferred exceeds the one million dollar value exclusion, the transferee must specify on an attachment to this claim the amount and allocation of the exclusion that is being sought.)

#### CERTIFICATION

I certify (or declare) under penalty of perjury under 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 and that I am the parent or child (or transferee's legal representative) of the transferors listed in Section B; and that all of the transferees are eligible transferees within the meaning of section 63.1 of the Revenue and Taxation Code.

SIGNATURE OF TRANSFEREE OR LEGAL REPRESENTATIVE	PRINTED NAME	DATE
MAILING ADDRESS		DAYTIME PHONE NUMBER
CITY, STATE, ZIP		EMAIL ADDRESS

Note: The Assessor may contact you for additional information.

# D. ADDITIONAL TRANSFEROR(S)/SELLER(S)

SOCIAL SECURITY NUMBER	SIGNATURE	RELATIONSHIP
	SOCIAL SECURITY NUMBER	SOCIAL SECURITY NUMBER SIGNATURE   Image: Signature Image: Signature   Image: Signature

## 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.
- 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.