EF-58-AH-R21-0522-22000071-1 BOE-58-AH (P1) REV. 21 (05-22)

CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD



Vincent P. Kehoe County of Mariposa Assessor/Recorder

P.O. Box 35 Mariposa, CA 95338 Ph: (209) 966-2332

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

1	1							
A. PROPERTY								
ASSESSOR'S PARCEL/ID NUMBER								
PROPERTY ADDRESS	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 autho	rizes the use of social security numbers for cial security number may provide a tax ide	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 tra	ansferors please complete Section D on the	reverse)						
Print full name(s) of transferor(s)								
2. Social security number(s)	<u> </u>							
3. Family relationship(s) to transferee(s) —								
If adopted, age at time of adoption								
4. Was this property the transferor's principal	residence? 🗌 Yes 🗎 No							
If yes , please check which of the following	exemptions was granted or was eligible to be	e granted on this property:						
☐ Homeowners' Exemption ☐ Disabled \								
5. Have there been other transfers that qualifie	•							
If yes , please attach a list of all previous tra	insfers that qualified for this exclusion. (This	list should include for each property: the County, vers, and family relationship. Transferor's principal						
6. Was only a partial interest in the property tr	ansferred? \square Yes \square No $\:$ If yes , percen	tage transferred %						
7. Was this property owned in joint tenancy?	☐ Yes ☐ No							
$\underline{\text{IMPORTANT}}\!\!:$ If the transfer was through the root trust and all amendments.	nedium of a will and/or trust, you must a	ttach a full and complete copy of the will and/						
	CERTIFICATION	English and all information have a find all in						
accompanying statements or documents, is true representative) of the transferees listed in Section	and correct to the best of my knowledge an C. I knowingly am granting this exclusion ar	foregoing and all information hereon, including any d that I am the parent or child (or transferor's legal nd will not file a claim to transfer the base year value						
of my principal residence under Revenue and Tax 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		DAYTIME PHONE NUMBER						
CITY, STATE, ZIP		EMAIL ADDRESS						

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



C. TR	ANSFEREE(S)/BUYER(S) (a	dditional trai	nsferees please comple	ete 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 adoption								
	If stepparent/stepchild relation registered with the California					c partnership <i>(registered mean</i> s □ Yes □ No			
	If no , was the marriage or re	gistered don	nestic partnership termi	nated by: \Box Dea	th 🗆 Divorce/Ter	rmination of partnership			
	If terminated by death, had the surviving stepparent remarried or entered into a registered domestic partnership as of the date of purchas or transfer?								
	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 purchase or transfer? \Box Yes \Box No								
	If no , was the marriage or re	gistered don	nestic partnership termi	nated by: Deat	h 🗌 Divorce/Terr	mination of partnership			
	If terminated by death, had the or transfer?		child-in-law remarried or	entered into a registe	red domestic partn	ership as of the date of purchase			
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.)								
			CERTIFI	CATION					
accomp represe the Rev	panying statements or documentative) of the transferors list venue and Taxation Code.	ents, is true ed in Section	and correct to the best n B; and that all of the t	of my knowledge an	d that I am the par le transferees withi	nformation hereon, including any ent or child (or transferee's lega in the meaning of section 63.1 o			
SIGNATU	IRE OF TRANSFEREE OR LEGAL REP	RESENTATIVE	PRINTED NAME		DATE				
MAILING ADDRESS DAYTIME PHONE NUMB						BER			
CITY ST	ATE 7ID				() EMAIL ADDRESS				
CITT, STA	EMAIL ADDRESS								
Note: ⁻	Γhe Assessor may contact yoυ	for addition	al information.		<u> </u>				
D. AD	DITIONAL TRANSFEROR(S)	/SELLER(S)						
	NAME	SOCIAL SECURITY NUMBER SIGNATURE		URE	RELATIONSHIP				
E. ADI	DITIONAL 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 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.



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