| | T (S | COUNTY OF ALAMEDA PHONG LA, ASSESSOR | | | | |
|--|--|---|--|--|--|--|
| DEATH OF REAL PROPERTY OWNER This notice is a request for a completed (Ownership Statement. Failure to file this stat result in the assessment of a penalty. | (510) 27 | (510) 272-3800 Fax (510) 208-4905 www.acgov.org/assessor | | | | |
| NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and | l mailing address) | | | | | |
| F | | the in dea ow | e personal represent each county where t | Revenue and Taxation Code requires the ative file this statement with the Assess ne decedent owned property at the time tatement for each parcel of real propernt. | | |
| | | | | DATE OF DEATH | | |
| NAME OF DECEDENT | | | | DATE OF DEATH | | |
| YES NO Did the decedent have complete the certificati | • | roperty in this c | ounty? If YES , ans | wer all questions. If NO , sign and | | |
| STREET ADDRESS OF REAL PROPERTY | CITY | | ZIP CODE | ASSESSOR'S PARCEL NUMBER (APN)* | | |
| | | | *If | more than 1 parcel, attach separate she | | |
| | N UNKNOWN) | DISPOSITION | NOF REAL PROP | | | |
| Copy of deed by which decedent acquire | , | | on without a will | Decree of distribution | | |
| Copy of decedent's most recent tax bill is | | | ode 13650 distribu | pursuant to will | | |
| Deed or tax bill is not available; legal des | | Action of trustee pure | | | | |
| TRANSFER INFORMATION 🗹 Check all | that apply and list o | lotails bolow | | | | |
| Decedent's spouse | Decedent's registe | | partner | | | |
| Decedent's child(ren) or parent(s). If qua Between Parent and Child must be filed Decedent's grandchild(ren). If qualified for Between Grandparent and Grandchild m | (see instructions). W or exclusion from rea just be filed (see ins | Vas this the dec assessment, a | endent's principal <i>Claim for Reasses</i> | residence? YES NO sment Exclusion for Transfer t's principal residence? YES N | | |
| Cotenant to cotenant. If qualified for exc instructions). Other beneficiaries or heirs. A trust. | lusion from reasses | sment, an <i>Affid</i> a | avit of Cotenant Re | | | |
| Cotenant to cotenant. If qualified for exc instructions). Other beneficiaries or heirs. | ADDRESS OF TR | | avit of Cotenant Re | | | |
| Cotenant to cotenant. If qualified for exc instructions). Other beneficiaries or heirs. A trust. | | | avit of Cotenant Re | | | |
| Cotenant to cotenant. If qualified for exc instructions). Other beneficiaries or heirs. A trust. | ADDRESS OF TR | RUSTEE | avit of Cotenant Re | | | |
| Cotenant to cotenant. If qualified for exc instructions). Other beneficiaries or heirs. A trust. | ADDRESS OF TR | RUSTEE | | CENT OF OWNERSHIP RECEIVED | | |
| Cotenant to cotenant. If qualified for exc instructions). Other beneficiaries or heirs. A trust. NAME OF TRUSTEE List names and percentage of owners! | ADDRESS OF TR | EUSTEE | | | | |
| Cotenant to cotenant. If qualified for exc instructions). Other beneficiaries or heirs. A trust. NAME OF TRUSTEE List names and percentage of owners! | ADDRESS OF TR | EUSTEE | | | | |
| Cotenant to cotenant. If qualified for exc instructions). Other beneficiaries or heirs. A trust. NAME OF TRUSTEE List names and percentage of owners! | ADDRESS OF TR | ttach the conve | NT PER | CENT OF OWNERSHIP RECEIVED | | |
| Cotenant to cotenant. If qualified for exclinistructions). Other beneficiaries or heirs. A trust. NAME OF TRUSTEE List names and percentage of ownersl NAME OF BENEFICIARY OR HEIRS NAME OF BENEFICIARY OR HEIRS This property has been or will be sold pr NOTE: Sale of the property does not re and Child if appropriate. | ADDRESS OF TR | ttach the conve | NT PER | CENT OF OWNERSHIP RECEIVED | | |

EF-502-D-R12-0221-01004261-2

BOE-502-D (P2) REV. 12 (02-21)

NO Will the decree of distribution include distribution of an ownership interest in any legal entity that owns real property in this county? If **YES**, will the distribution result in any person or legal entity obtaining control of more than 50% of the ownership of that legal entity? \square YES \square NO If **YES**, complete the following section.

| NAME AND ADDRESS OF LEGAL ENTITY | | | NAME OF PERSON OR ENTITY GAINING SUCH CONTROL | | | | | | | |
|---|---|--|---|---|--------------------------------|------------------------------------|--------------------------------------|--|--|--|
| YES NO | | ent the lessor or lessee in a lease , provide the names and addresse | | | | rs or m | ore, incl | uding renewal | | |
| NAM | E | MAILING ADDRESS | | CITY | | | STATE | ZIP CODE | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
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| | | | | | | | | | | |
| | МАІ | LING ADDRESS FOR FUTURE PI | ROPFF | TY TAX STATEMEN | rs | | | | | |
| NAME | | | | | | | | | | |
| | | | | | | - | | | | |
| ADDRESS | | | CITY | | | STATE | ZIP CODE | Ξ | | |
| | | | | | | | | | | |
| l certify (or decla | are) under penalty | CERTIFICA of perjury under the laws of the St correct and complete to the best o | ate of | | rmatio | n conta | ined her | ein is true, | | |
| SIGNATURE OF SPOUSE/R | EGISTERED DOMESTIC | PARTNER/PERSONAL REPRESENTATIVE | PF | RINTED NAME | | | | | | |
| | | | | | | | | | | |
| TITLE | | | | | DATE | | | | | |
| EMAIL ADDRESS | | | | ΠΔΥΤΙΜ | | | | | | |
| | | | | DAYTIME TELEPHONE | | | | | | |
| | | INSTRUCTI | ONS | | (| / | | | | |
| | Failure to | file a Change in Ownership Staten | | thin the time prescribe | ed by l | aw may | / result i | n a penalty of | | |
| | | 00 or 10% of the taxes applicable to | | | | | | | | |
| | | ichever is greater, but not to excee | | | | | | | | |
| | | ers' exemption or twenty thousand on if that failure to file was not willful | | | | | | | | |
| | | like any other delinquent property ta | | | | | | | | |
| Section 480 of the Re- | | | anoo ai | | no po | lanco | ier nenp | aymona | | |
| by the county asse | ssor, the transferee ed for in subdivision | ownership of real property or of a manu shall file a signed change in ownership (c). In the case of a change in ownersh | stateme | nt in the county where the | e real p | roperty | or manufa | actured home is | | |
| owned real proper appraisal is filed wi the medium of a tru | ty at the time of dea th the court clerk. In ust, the change in o | a change in ownership statement with ath that is subject to probate proceeding all other cases in which an interest in re- wnership statement or statements shall | gs. The eal prop be filed | statement shall be filed erty is transferred by reas by the trustee (if the pro | prior to on of d perty w | o or at th eath, inc as held | e time th luding a in trust) c | e inventory and transfer through or the transferee | | |
| | | n each county in which the decedent ow | | interest in real property v | vithin 1 | 50 days | after the | date of death. | | |
| • | | red by law. Please reference the followin neficial interest passes to the decedent' | 0 | offectively on the decade | at'e dat | o of doo | th Howo | vor a document | | |
| | | neirs. An attorney should be consulted to | | | | | III. HOWE | vei, a document | | |
| - | rship: California Coo e of death of decede | de of Regulations, Title 18, Rule 462.26 ent." | 0(c), sta | ates in part that "[i]nherita | nce (b | y will or i | ntestate | succession)" | | |
| | | de, Section 8800, states in part, "Concu o file a certification that the requirement | | | | | | | | |
| (1) Àre not applic (2) Have been sa | able because the de | ecedent owned no real property in Calif of a change in ownership statement with | ornia at | the time of death | | | | | | |
| of transfer to a th | nird party; or within s | dchild Exclusions: A claim must be filed six months after the date of mailing of a An application may be obtained by conta | a Notice | of Assessed Value Char | | | | | | |
| assessor. This | statement will ren | it must be filed with the county a main confidential as required by F cuments and are not open to inspection | Revenue | e and Taxation Code | Sectio | | | | | |

