EF-58-AH-R20-0520-08000565-1 BOE-58-AH (P1) REV. 20 (05-20)

## CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD



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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)  | DATE OF DEATH (if applicable)   | DATE OF DECREE OF DISTRIBUTION (if applicable)  |  |  |  |  |  |  |
| States Code, section 405(c)(2)(C)(i) which aut                              | horizes the use of social security n<br>social security number may provide  | renue and Taxation Code section 63.1. [See Title 42 United umbers for identification purposes in the administration of any e a tax identification number issued by the Internal Revenue sion limit.   |  |  |  |  |  |  |
| B. TRANSFEROR(S)/SELLER(S) (additional                                      | transferors please complete Section   | n D on the reverse)   |  |  |  |  |  |  |
| 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   | If adopted, age at time of adoption   |   |  |  |  |  |  |  |
| 4. Was this property the transferor's princip                               | I. Was this property the transferor's principal residence? ☐ Yes ☐ No   |   |  |  |  |  |  |  |
| If <b>yes</b> , please check which of the following                         | g exemptions was granted or was e   | eligible to be granted on this property:  |  |  |  |  |  |  |
| ☐ Homeowners' Exemption ☐ Disable   | d Veterans' Exemption   |   |  |  |  |  |  |  |
| 5. Have there been other transfers that qua                                 | •   | □ No  |  |  |  |  |  |  |
|   |   | usion. (This list should include for each property: the County, Ass/buyers, and family relationship. Transferor's principal residence   |  |  |  |  |  |  |
| 6. Was only a partial interest in the property                              | 6. Was only a partial interest in the property transferred? $\Box$ Yes $\Box$ No $\Box$ If <b>yes</b> , percentage transferred% |   |  |  |  |  |  |  |
| 7. Was this property owned in joint tenancy                                 | ? ☐ Yes ☐ No  |   |  |  |  |  |  |  |
| <b>IMPORTANT</b> : If the transfer was through th trust and all amendments. | e medium of a will and/or trust, y  | ou must attach a full and complete copy of the will and/or  |  |  |  |  |  |  |
|   | CERTIFICATION   |   |  |  |  |  |  |  |
| accompanying statements or documents, is tru                                | ie and correct to the best of my kno<br>ion C. I knowingly am granting this e   | nia that the foregoing and all information hereon, including any owledge and that I am the parent or child (or transferor's legal exclusion and will not file a claim to transfer the base year value |  |  |  |  |  |  |
| SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATI                               |   | DATE  |  |  |  |  |  |  |
| CIONATURE OF TRANSFERON OR LEGAL REPRESENTATION                             | (E. DDINITED NAME   | DATE  |  |  |  |  |  |  |
| SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATI                               | VE 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



|  | RANSFEREE(S)/BUYER(S) (a  |              |                           |                  |                    |   |  |  |  |
|--|---|--------------|---------------------------|------------------|--------------------|---|--|--|--|
|  | Print full name(s) of transferee  |              |                           |                  |                    |   |  |  |  |
| 2.   | Family relationship(s) to transferor(s)   |              |                           |                  |                    |   |  |  |  |
|  | If adopted, age at time of adop   |              |                           |                  |                    |   |  |  |  |
| If stepparent/stepchild relationship is involved, was parent still married to or in a registered domestic partnership (reginal registered with the California Secretary of State) with stepparent on the date of purchase or transfer? $\square$ Yes $\square$ No  |   |              |                           |                  |                    |   |  |  |  |
|  | f no, was the marriage or registered domestic partnership terminated by: $\Box$ Death $\Box$ Divorce/Termination of partnership   |              |                           |                  |                    |   |  |  |  |
| If terminated by death, had the surviving stepparent remarried or entered into a registered domestic partnership as of the 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 chipurchase or transfer?  No |   |              |                           |                  |                    |   |  |  |  |
|  |   |              |                           |                  |                    |   |  |  |  |
|  | If terminated by death, had the surviving child-in-law remarried or entered into a registered domestic partnership as of the date of purcha<br>or transfer? $\square$ Yes $\square$ No  |              |                           |                  |                    |   |  |  |  |
| 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           |                    |   |  |  |  |
| represe<br>the Re  |   | d in Sectior |                           |                  |                    | ent or child (or transferee's lega<br>n the meaning of section 63.1 o |  |  |  |
| <b>&gt;</b>  |   |              |                           |                  |                    |   |  |  |  |
| MAILING  | ADDRESS   |              |                           |                  | DAYTIME PHONE NUME | BER   |  |  |  |
| CITY, STATE, ZIP   |   |              |                           |                  | EMAIL ADDRESS      |   |  |  |  |
| Note:  | The Assessor may contact you  | for addition | al information.           |                  | 1                  |   |  |  |  |
|  |   | D            | . ADDITIONAL TRANS        | FEROR(S)/SELLER  | (S)                |   |  |  |  |
| NAME   |   | SOCIAL       | OCIAL SECURITY NUMBER SIG |                  | URE                | RELATIONSHIP  |  |  |  |
|  |   |              |                           |                  |                    |   |  |  |  |
|  |   |              |                           |                  |                    |   |  |  |  |
|  |   |              |                           |                  |                    |   |  |  |  |
|  |   |              |                           |                  |                    |   |  |  |  |
|  |   | E            | E. ADDITIONAL TRANS       | SFEREE(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.

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