EF-58-AH-R20-0520-21002885-1 BOE-58-AH (P1) REV. 20 (05-20)

CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD



SHELLY SCOTT ASSESSOR-RECORDER-COUNTY CLERK

CHANGE IN OWNERSHIP PO Box C, Civic Center Branch San Rafael, CA 94913 PH (415) 473-7231 FAX (415) 473-6542 www.marincounty.gov

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

		ı						
Δ	PROPERTY							
	ESSOR'S PARCEL NUMBER							
PRO	PERTY ADDRESS	CITY						
REC	ORDER'S DOCUMENT NUMBER	DATE OF PURCHASE OR TRANSFER						
PRO	BATE NUMBER (if applicable)	DATE OF DEATH (if applicable)	DATE OF DECREE OF DISTRIBUTION (if applicable)					
Sta tax. Ser	tes Code, section 405(c)(2)(C)(i) which author	orizes the use of social security ocial security number may prov and the state to monitor the exc						
	Print full name(s) of transferor(s)	<u> </u>						
	2. Social security number(s)							
	B. Family relationship(s) to transferee(s) —							
J	If adopted, age at time of adoption							
1								
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 granted on this property:								
							_	 ☐ Homeowners' Exemption ☐ Disabled Veterans' Exemption 5. Have there been other transfers that qualified for this exclusion? ☐ Yes ☐ No
Э	·							
If yes , please attach a list of all previous transfers that qualified for this exclusion. (This list should include for each property: the C sessor's parcel number, address, date of transfer, names of all the transferees/buyers, and family relationship. Transferor's principal must be identified.)								
6	Was only a partial interest in the property transferred? \Box Yes \Box No \Box If yes , percentage transferred %							
7	7. Was this property owned in joint tenancy?							
	PORTANT: If the transfer was through the st and all amendments.	medium of a will and/or trust	, you must attach a full and complete copy of the will and/or					
		CERTIFICATIO						
acc rep of n	companying statements or documents, is true	and correct to the best of my n C. I knowingly am granting thi xation Code section 69.5.	fornia that the foregoing and all information hereon, including any knowledge and that I am the parent or child (or transferor's legal is exclusion and will not file a claim to transfer the base year value					
-	NATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	PRINTED NAME	DATE					
MAIL	LING ADDRESS	DAYTIME PHONE NUMBER						
		()						
CITY	(, STATE, ZIP	EMAIL ADDRESS						

(Please complete applicable information on reverse side.)

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



1.	Print full name(s) of transferee	e(s)						
2.	2. Family relationship(s) to transferor(s)							
	If adopted, age at time of adoption							
	If 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 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 no , was the marriage or registered domestic partnership terminated by: \Box Death \Box 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.	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							
the Re	entative) of the transferors liste venue and Taxation Code. JRE OF TRANSFEREE OR LEGAL REPR		PRINTED NAME	ransferees are eligibl	DATE	in the meaning of section 63.1 o		
					DAYTIME DUONE NUM	DED.		
MAILING	ADDRESS				DAYTIME PHONE NUMI	DEK		
CITY, ST	ATE, ZIP				EMAIL ADDRESS			
Note:	The Assessor may contact you	for addition	al information.		1			
		D	. ADDITIONAL TRANS	FEROR(S)/SELLER	R(S)			
	NAME	SOCIAL	SECURITY NUMBER	SIGNATURE		RELATIONSHIP		
		E	. ADDITIONAL TRANS	 	(S)			
		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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