EF-58-H-R02-0520-36000155-1 BOE-58-H REV 02 (05/20)

EMAIL ADDRESS

SIGNATURE OF SURVIVING COTENANT

AFFIDAVIT OF COTENANT RESIDENCY



Josie Gonzales Assessor-Recorder-County Clerk

San Bernardino County 222 W. Hospitality Lane, 4th Floor San Bernardino, CA 92415-0311 arc.sbcounty.gov 909-387-8307 or 1-877-885-7654

| NAME AND MAILING ADDRESS | | |
|--|--|--|
| (Make necessary corrections to the printed name and mailing address) ☐ | ٦ | |
| L | 62.3, if cer interest in cotenant t not a chan | provisions of Revenue and Taxation Code section tain conditions are met, a transfer of a cotenancy real property from one cotenant to the other hat takes effect upon the death of one cotenant is upon the death of one cotenant is upon the death of one cotenant is upon after January 1, 2013. |
| The change in ownership exclusion for a transfer of an interest in real proper | erty between cotenar | nts that takes effect upon the death of one cotenant |
| applies as long as all of the following are met: | | |
| The transfer is solely by and between two individuals who together ow As a result of the death of the transferor cotenant, the deceased coten resulting in the surviving cotenant owning 100 percent of the real properties. For the one-year period immediately preceding the death of the transfer | ant's interest in the retry, and thereby terreror cotenant, both o | eal property is transferred to the surviving cotenant, minating the cotenancy. f the cotenants were owners of record. |
| The real property was the principal residence of both cotenants immed For the one year paried immediately preceding the death of the transfer. | • • • | |
| For the one-year period immediately preceding the death of the transfe The surviving cotenant must sign, under penalty of perjury, an affidavit | | |
| deceased cotenant for the one-year period immediately preceding the | - | |
| NAME OF SURVIVING COTENANT | | |
| TWINE OF CONVINCE COTEIN WIT | | |
| NAME OF DECEASED COTENANT | | DATE OF DEATH |
| STREET ADDRESS OF REAL PROPERTY | | ASSESSOR'S PARCEL NUMBER (APN) |
| CITY, STATE, ZIP CODE | | |
| Property was eligible for: Homeowners' Exemption Disabled | d Veterans' Exemption | on |
| Disposition of real property: | | |
| Affidavit of death of joint tenant | | |
| Decree of distribution pursuant to will or intestate succession | | |
| Action of trustee pursuant to terms of trust (Attach a complete copy | of trust and all ame | ndments) |
| 1. Was this real property the principal residence of the deceased cotenant for | or the one-year perio | d immediately preceding the date of death? \square Yes \square No |
| 2. Was this real property the principal residence of the surviving cotenant for | the one-year period | immediately preceding the date of death? $\ \ \ \ \ \ \ \ \ \ \ \ \ $ |
| 3. Are there any other beneficiaries of the real property? Yes Yes | No | |
| If yes, please list other beneficiaries: | | |
| CERTIFICATION | N OF COTENAN | IT |
| I certify (or declare) under penalty of perjury under the laws of the State accompanying statements or documents, is true and correct to the best this real property for the one-year period immediately preceding the deceded | e of California that st of my knowledge | the foregoing and all information hereon, including any |

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

DATE

TELEPHONE NUMBER

