CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD

NAME AND MAILING ADDRESS



(Make necessary corrections to the printed name	e and mailing address.)	
I	I	
	I	
A. PROPERTY		
ASSESSOR'S PARCEL/ID NUMBER		
PROPERTY ADDRESS		CITY
RECORDER'S DOCUMENT NUMBER		DATE OF PURCHASE OR TRANSFER
PROBATE NUMBER (if applicable)	ATE OF DEATH (if applicable)	DATE OF DECREE OF DISTRIBUTION (if applicable)
The disclosure of acciel equilibrium had in		A Truction Orde continue CO A Fore Title 40 United
		d Taxation Code section 63.1. [See Title 42 United or identification purposes in the administration of any
		lentification number issued by the Internal Revenue
Service. The numbers are used by the Assessor a		
B. TRANSFEROR(S)/SELLER(S) (additional tra	nsferors please complete Section D on th	e reverse)
1. 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		
4. Was this property the transferor's principal r	esidence? 🗆 Yes 🔲 No	
If yes , please check which of the following e		be granted on this property:
□ Homeowners' Exemption □ Disabled V		se granted on the property.
5. Have there been other transfers that qualifie		
		s list should include for each property: the County, uyers, and family relationship. Transferor's principal
residence must be identified.)		
6. Was only a partial interest in the property tra	ansferred?	entage transferred %
7. Was this property owned in joint tenancy?		
	nedium of a will and/or trust, you must	attach a full and complete copy of the will and/
or trust and all amendments.		
I contife (an de la ve) maden non elte ef nonicus and	CERTIFICATION	- for a second all information because including and
		e foregoing and all information hereon, including any and that I am the parent or child (or transferor's legal
		and will not file a claim to transfer the base year value
of my principal residence under Revenue and Taxa SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	ation Code section 69.5.	DATE
		DATE
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	PRINTED NAME	DATE
MAILING ADDRESS	I	DAYTIME PHONE NUMBER
		()
CITY, STATE, ZIP		EMAIL ADDRESS

CITY, STATE, ZIP

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



C. TR	ANSFEREE(S)/BUYER(S) (ad	lditional transferees please comple	te Section E below)	
1.	Print full name(s) of transfere	e(s)		
2.	Family relationship(s) to trans	feror(s)		
	If adopted, age at time of ado	ption		
			married to or in a registered dom on the date of purchase or transfer	estic partnership <i>(registered means</i> ? Yes No
	If no , was the marriage or reg	istered domestic partnership termi	nated by: \Box Death \Box Divorce	e/Termination of partnership
	If terminated by death, had the or transfer? \Box Yes \Box N		entered into a registered domestic p	artnership as of the date of purchase
		ed, was the child-in-law still married es \Box No	d to or in a registered domestic par	tnership with the child on the date of
	If no, was the m <mark>arriage or rec</mark>	istered domestic partnership termi	nated by: 🗌 Death 🔲 Divorce/	Termination of partnership
	If terminated by death, had the or transfer? □ Y <mark>es</mark> □ N		entered into a <mark>re</mark> giste <mark>re</mark> d domestic p	partnership as of the date of purchase
3.			l property transferred exceeds the c nt and alloc <mark>ati</mark> on of the exclusion th	one million dollar value exclusion, the at is being sought.)
		CERTIFI	CATION	
accom repres the Re	panying statements or docume	nts, is true and correct to the best d in Section B; and that all of the t	of my knowledge and that I am the	all information hereon, including any parent or child (or transferee's legal within the meaning of section 63.1 of
MAILING	ADDRESS		DAYTIME PHONE	NUMBER
CITY, ST	ATE, ZIP		EMAIL ADDRESS	
Note:	The Assessor may contact you	for additional information.		
D. AD	DITIONAL TRANSFEROR(S)/	SELLER(S)		
	NAME	SOCIAL SECURITY NUMBER	SIGNATURE	RELATIONSHIP

NAME	SOCIAL SECURITY NUMBER	SIGNATURE	RELATIONSHIP

E. ADDITIONAL 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 onetime 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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