EF-58-AH-R21-0522-02000107-1 BOE-58-AH (P1) REV. 21 (05-22)

CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD



David Peets Alpine County Assessor/Recorder 50 Diamond Valley Rd. P.O. Box 155

Markleeville, CA 9612

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

L	⅃			
A. PROPERTY				
ASSESSOR'S PARCEL/ID 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 author	rizes the use of social security numbers for cial security number may provide a tax ide n <mark>d the state to m</mark> onit <mark>or the ex</mark> clusion limit.	Taxation Code section 63.1. [See Title 42 United identification purposes in the administration of any ntification number issued by the Internal Revenue		
	and the control of th			
Print full name(s) of transferor(s) Secial acquirity number(s)				
Social security number(s)	7 - 			
3. Family relationship(s) to transferee(s)				
If adopted, age at time of adoption —				
Was this property the transferor's principal r	residence?			
If yes , please check which of the following e	exemptions was granted or was eligible to be	granted on this property:		
\square Homeowners' Exemption \square Disabled \lor	/eterans' Exemption			
5. Have there been other transfers that qualifie	ed for this exclusion?			
If yes , please attach a list of all previous tra Assessor's parcel number, address, date of residence must be identified.)	nsfers that qualified for this exclusion. (This f transfer, names of all the transferees/buy	list should include for each property: the County, ers, and family relationship. Transferor's principal		
6. Was only a partial interest in the property transferred? Yes No If yes , percentage transferred %				
7. Was this property owned in joint tenancy?	☐ Yes ☐ No			
$\frac{\text{IMPORTANT}}{\text{or trust and all amendments}}.$ If the transfer was through the n	nedium of a will and/or trust, you must at	tach a full and complete copy of the will and/		
	CERTIFICATION			
accompanying statements or documents, is true representative) of the transferees listed in Section	and correct to the best of my knowledge an C. I knowingly am granting this exclusion an	foregoing and all information hereon, including any d that I am the parent or child (or transferor's lega d will not file a claim to transfer the base year value		
of my principal residence under Revenue and Tax. SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	ation Code section 69.5.	DATE		
>				
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	PRINTED NAME	DATE		
>				
MAILING ADDRESS		DAYTIME PHONE NUMBER		
OUTM OTATE 7/D		()		
CITY, STATE, ZIP		EMAIL ADDRESS		

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



	S) (additional transferees please com	· · · · · · · · · · · · · · · · · · ·	
 Print full name(s) of trar 	nsferee(s)		
	transferor(s)		
	of adoption		
		till married to or in a registered domesent on the date of purchase or transfer?	
If no , was the marriage	or registered domestic partnership ter	minated by: Death Divorce/	Termination of partnership
If terminated by death, hor transfer? ☐ Yes		or entered into a registered domestic par	tnership as of the date of purchase
If in-law relationship is i purchase or transfer?	nvolved, was the child-in-law still mark \square Yes \square No	ried to or in a registered domestic partn	ership with the child on the date o
If no , was the marriage	or registered domestic partnership ter	minated by: Death Divorce/Te	ermination of partnership
If terminated by death, h or transfer? ☐ Yes		or entered into a registered domestic par	rtnership as of the date of purchas
		real property transferred exceeds the on ount and allocation of the exclusion that	
	CERT	IFICATION	
MAILING ADDRESS CITY, STATE, ZIP Note: The Assessor may contact		DAYTIME PHONE NU () EMAIL ADDRESS	JMBER
D. ADDITIONAL TRANSFERO			
NAME	SOCIAL SECURITY NUMBE	R SIGNATURE	RELATIONSHIP
E. ADDITIONAL TRANSFERE	E(S)/BUYER(S)		
NAME			RELATIONSHIP



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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 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.

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.



