EF-58-AH-R16-0514-03000440-1 BOE-58-AH (P1) REV. 16 (05-14)

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



## James B Rooney Assessor of Amador County

810 Court Street Jackson, CA 95642 PH: (209) 223-6351 FAX: (209) 223-6721

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)
The disclosure of social security numbers is mandatory as required by Revenue and T States Code, section 405(c)(2)(C)(i) which authorizes the use of social security numbers for tax.] A foreign national who cannot obtain a social security number may provide a tax ider Service. The numbers are used by the Assessor and the state to monitor the exclusion limit.  B. TRANSFEROR(S)/SELLER(S) (additional transferors please complete "B" on the reverse	identification purposes in the administration of any trification number issued by the Internal Revenue
Print full name(s) of transferor(s)	,
Social security number(s)	
· // — —	
Family relationship(s) to transferee(s)  If adopted, age at time of adoption	
4. Was this property the transferor's principal residence?   Yes  No	
If <b>yes</b> , please check which of the following exemptions was granted or was eligible to	he granted on this property:
☐ Homeowners' Exemption ☐ Disabled Veterans' Exemption	be granted on the property.
5. Have there been other dæ) • △\s that qualified for this exclusion? Á ☐ Yes ☐ No	
If <b>yes</b> , please attach a list of all previous transfers that qualified for this exclusion. (Th Assessor's parcel number, address, date of transfer, names of all the transferees/buy residence must be identified.)	
6. Was only a partial interest in the property transferred?  Yes  No If yes, perce	entage transferred %
7. Was this property owned in joint tenancy? ☐ Yes ☐ No	
8. If the transfer was through the medium of a trust, you <b>must</b> attach a copy of the trust.	
CERTIFICATION	
I certify (or declare) under penalty of perjury under the laws of the State of California that the accompanying statements or documents, is true and correct to the best of my knowledge and representative) of the transferees listed in Section C. I knowingly am granting this exclusion value of my principal residence under Revenue and Taxation Code section 69.5.	d that I am the parent or child (or transferor's legal
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	DATE
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	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



C.	TR	ANSFEREE(S)/BUYER(S) (a	dditional transferees please co	mplete "C" b	elow)				
	1.	Print full name(s) of transferee	e(s)						
	2.	Family relationship(s) to transf	Feror(s)						
		If adopted, age at time of adop	otion						
			nship is involved, was parent s Secretary of State) with steppar				partnership <i>(registered means</i> ☐ Yes ☐ No		
		If <b>no</b> , was the marriage or regi	nation of partnership						
		If terminated by death, had the or transfer? ☐ Yes ☐ No	surviving stepparent remarried	or entered in	nto a registered	domestic partne	ership as of the date of purchase		
	If in-law relationship is involved, was the son-in-law or daughter-in-law still married to or in a registered domestic partnership with the daughter or son on the date of purchase or transfer?								
		If <b>no</b> , was the marriage or regi	stered domestic partnership te	rminated by:	☐ Death ☐	Divorce/Termi	nation of partnership		
	3.	the date of purchase or transfer ALLOCATION OF EXCLUSION	er?	real property	transferred exc	eeds the one n	tered domestic partnership as of nillion dollar value exclusion, the		
		transferee must sp <mark>ec</mark> ify on an	attachment to this claim the an		ocation of the ex	xclusion that is	being sought.)		
				TIFICATION			<mark>nformatio</mark> n h <mark>ere</mark> on, including any		
accompanying statements or documents, is true and correct to the best of my knowledge and that I am the parent or child representative) of the transferors listed in Section B; and that all of the transferees are eligible transferees within the meaning the Revenue and Taxation Code.  SIGNATURE OF TRANSFEREE OR LEGAL REPRESENTATIVE  DATE  SIGNATURE OF TRANSFEREE OR LEGAL REPRESENTATIVE  DATE									
_	NG.	ADDRESS			DAY	TIME PHONE NUME	BER		
CITY,	STA	TE, ZIP	<del>)( )</del>		(EMA	IL ADDRESS			
Note	: T	he Assessor may contact you t	or additional information.						
	B. ADDITIONAL TRANSFEROR(S)/SELLER(S) (continued)								
		NAME	SOCIAL SECURITY NUMBER	R	SIGNATURE		RELATIONSHIP		
			C. ADDITIONAL TRANSF	EREE(S)/BU	JYER(S) (contin	ued)	Г		
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.

