CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD

NAME AND MAILING ADDRESS

(Make necessary corrections to the printed name and mailing address.)



Howard LaHaie Humboldt County Assessor 825 Fifth ST Eureka, CA 95501-1153 Phone: (707) 445-7276

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)				
States Code, section 405(c)(2)(C)(i) which author tax.] A foreign national who cannot obtain a soc Service. The numbers are used by the Assessor a	izes the use of social security numbers ial security number may provide a tax nd the state to monit <mark>or</mark> the exclusion limi					
B. TRANSFEROR(S)/SELLER(S) (additional tra	nsferors please complete Section D on	the reverse)				
 Print full name(s) of transferor(s) 						
2. Social security number(s)	2. Social security number(s)					
3. Family relationship(s) to transferee(s)						
If adopted, age at time o <mark>f a</mark> doption						
4. Was this property the transferor's principal r	esidence? 🗌 Yes 🔲 No					
If yes, please check which of the following e	exemptions was granted or was eligible	to be granted on this property:				
☐ Homeowners' Exemption ☐ Disabled V	eterans' Exemption					
5. Have there been other transfers that qualifie	5. Have there been other transfers that qualified for this exclusion? Yes No					
		This list should include for each property: the County, /buyers, and family relationship. Transferor's principal				
6. Was only a partial interest in the property tra	ansferred? 🗆 Yes 🗆 No If yes, pe	rcentage transferred%				
7. Was this property owned in joint tenancy?		-				
		st attach a full and complete copy of the will and/				
	CERTIFICATION	the formation and all information have a local difference				
accompanying statements or documents, is true a representative) of the transferees listed in Section	and correct to the best of my knowledge C. I knowingly am granting this exclusio	the foregoing and all information hereon, including any e and that I am the parent or child (or transferor's legal n 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	PRINTED NAME	DATE				
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	PRINTED NAME	DATE				
MAILING ADDRESS	1	DAYTIME PHONE NUMBER				
CITY, STATE, ZIP		EMAIL ADDRESS				
(Please THIS DOCI	complete applicable information on r	everse side.) IC INSPECTION				



C. TR	ANSFEREE(S)/BUYER(S) (a	dditional transferees please complet	e Section E below)			
1.	Print full name(s) of transfere	e(s)				
2.	Family relationship(s) to trans	sferor(s)				
	If adopted, age at time of ado	ption				
		onship is involved, was parent still Secretary of State) with stepparent (estic partnership <i>(registered means</i> ? □ Yes □ No		
	If no , was the marriage or registered domestic partnership terminated by: If terminated by death, had the surviving stepparent remarried or entered into a registered domestic partnership as of the date of purc or transfer? Yes 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 o purchase or transfer? 🛛 Yes 🗋 No					
	If no , was the m <mark>arriage or re</mark>	pistered domestic partnership termin	ated by: 🗌 Death 🔲 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 purchas or transfer?					
3.		ON (If the full cash value of the real attachme <mark>nt</mark> to th <mark>is</mark> claim the amour				
		CERTIFIC	ATION			
accom repres the Re	panying statements or docume	perjury under the laws of the State of ents, is true and correct to the best of ed in Section B; and that all of the transmission RESENTATIVE PRINTED NAME	of my knowledg <mark>e and th</mark> at I am the	parent or child (or transferee's legal		
MAILING	GADDRESS		DAYTIME PHONE N	IUMBER		
CITY, ST	TATE, 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.

||S||