EF-58-AH-R16-0514-17000479-1 BOE-58-AH (P1) REV. 16 (05-14)

CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD



Douglas W. Wacker County Assessor-Recorder

Lake County Courthouse 255 North Forbes Street Lakeport, CA 95453

Assessor's Office Phone: 707-263-2302 Recorder's Office Phone: 707-263-2293

Fax: 707-263-3703

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

L								
A. PROPERTY								
ASSESSOR'S PARCEL NUMBER								
PROPERTY ADDRESS		СІТУ						
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 au	thorizes the use of social security nun social security number may provide a or and the state to monitor the exclusio							
Print full name(s) of transferor(s)								
Social security number(s) Family relationship(s) to transferee(s)	2. Social security number(s)							
If adopted, age at time of adoption								
	4. Was this property the transferor's principal residence? ☐ Yes ☐ No							
If yes , please check which of the follo ☐ Homeowners' Exemption ☐ Disa	• •	eligible to be granted on this property:						
Assessor's parcel number, address, or residence must be identified.)	ous transfers that qualified for this excludate of transfer, names of all the transferty transferred?	No lusion. (This list should include for each property: the Countsferees/buyers, and family relationship. Transferor's principlityes, percentage transferred%						
8. If the transfer was through the mediur	•	of the trust						
	CERTIFICATION	4 110 11401.						
accompanying statements or documents, is to representative) of the transferees listed in Sevalue of my principal residence under Revenue	rue and correct to the best of my know ection C. I knowingly am granting this e and Taxation Code section 69.5.	ia that the foregoing and all information hereon, including a wledge and that I am the parent or child (or transferor's leg s exclusion and will not file a claim to transfer the base ye						
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTAT	IVE	DATE						
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTAT	IVE	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								
		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 no , was the marriage or regi	Divorce/Termi	nation of partnership						
	If terminated by death, had the surviving stepparent remarried or entered into a registered domestic partnership as of the date of pure or transfer? Yes No									
	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 daughter or son on the date of purchase or transfer? \square Yes \square No									
If no , was the marriage or registered domestic partnership terminated by: Death Divorce/Termination 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			
repression	Rev		ent or child <mark>(or</mark> transferee's legal n the mean <mark>in</mark> g of section 63.1 of							
_	NG.	ADDRESS			DAY	TIME PHONE NUME	BER			
CITY,	STA	TE, ZIP)()		(EMA	IL ADDRESS				
Note	: T	he Assessor may contact you t	or additional information.							
			B. ADDITIONAL TRANSFE	ROR(S)/SE	LLER(S) (contin	nued)				
NAME		NAME	SOCIAL SECURITY NUMBER		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.

