CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD



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

L			
A. PROPERTY			
ASSESSOR'S PARCEL/ID NUMBER			
PROPERTY ADDRESS	71.5		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	authorizes the use of social sec a social security number may ssor an <mark>d the st</mark> ate to monitor the	cu <mark>rity numbers</mark> for id provide a tax identi e exclusion limit.	xation Code section 63.1. [See Title 42 United entification purposes in the administration of any fication number issued by the Internal Revenue verse)
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 prin	cipal residence? 🗌 Yes 🗍	No	
If yes , please check which of the follo			aranted on this property:
☐ Homeowners' Exemption ☐ Disa	•	5 5	
5. Have there been other transfers that c		Yes 🗆 No	
If yes, please attach a list of all previo	us transfers that qualified for th	is exclusion. (This lis	it should include for each property: the County, 's, and family relationship. Transferor's principal
6. Was only a partial interest in the prope	erty transferred? 🛛 Yes 🔲 M	No If yes , percentag	ge transferred %
7. Was this property owned in joint tenar	icy? 🗌 Yes 🗌 No		
IMPORTANT: If the transfer was through or trust and all amendments.	the medium of a will and/or t	trust, you must atta	ch a full and complete copy of the will and/
	CERTIFICA		
accompanying statements or documents, is	true and correct to the best of	my knowledge and	regoing and all information hereon, including any that I am the parent or child (or transferor's legal will not file a claim to transfer the base year value
of my principal residence under Revenue an SIGNATURE OF TRANSFEROR OR LEGAL REPRESENT	d Taxation Code section 69.5.		- -
		U/	ATE
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENT	ATIVE PRINTED NAME	D/	ATE

▶	
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) (ad	lditional transferees please comple	te Section E below)	
1.	Print full name(s) of transferee	e(s)		
2.	Family relationship(s) to trans	feror(s)		
	If adopted, age at time of ado	ption		
		nship is involved, was parent still Secretary of State) with stepparent		nestic partnership <i>(registered means</i> r? □ Yes □ No
	If no, was the marriage or reg	istered domestic partnership termi	nated by: \Box Death \Box Divord	e/Termination of partnership
If terminated by death, had the surviving stepparent remarried or entered into a registered domestic partnership as of the or transfer?				
	If in-law relationship is involve purchase or transfer? \Box Y		d to or in a registered domestic pa	rtnership with the child on the date of
	If no, was the m <mark>arriage or reg</mark>	istered domestic partnership termi	nated 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 or transfer? \Box Yes \Box No				
3.		ON (If the full cash value of the rea attachme <mark>nt t</mark> o th <mark>is</mark> claim the amou		one mil <mark>lion dollar v</mark> alue exclusion, the hat is <mark>b</mark> eing soug <mark>ht.</mark>)
		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)

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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