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

NAME AND MAILING ADDRESS

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



## **Shelly Scott** Assessor-Recorder-County Clerk

County of Marin CHANGE IN OWNERSHIP DIVISION P.O. Box C San Rafael, CA 94913 Phone: (415) 473-7231 Fax: (415) 473-6255 www.marincounty.gov

ASSESSOR'S PARCEL/ID NUMBER					
PROPERTY ADDRESS		CITY			
		DATE OF PURCHASE OR TRANSFER			
PROBATE NUMBER (if applicable)	ATE OF DEATH (if applicable)	DATE OF DECREE OF DISTRIBUTION (if applicable)			
The disclosure of social security numbers is	mandatory as required by Revenue and	Taxation Code section 63.1. [See Title 42 United			
States Code, section 405(c)(2)(C)(i) which author	izes the use of social security numbers for	identification purposes in the administration of any			
tax.] A foreign national who cannot obtain a soc Service. The numbers are used by the Assessor a		ntification number issued by the Internal Revenue			
B. TRANSFEROR(S)/SELLER(S) (additional tra					
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 principal r					
If <b>yes</b> , please check which of the following e		e granted on this property:			
☐ Homeowners' Exemption ☐ Disabled V					
5. Have there been other transfers that qualifie					
		list should include for each property: the County,			
residence must be identified.)	t transfer, names of all the transferees/buy	rers, and family relationship. Transferor's principal			
	6. Was only a partial interest in the property transferred?  Yes No If <b>yes</b> , percentage transferred%				
<ol> <li>Was this property owned in joint tenancy?</li> </ol>					
<b>IMPORTANT</b> : If the transfer was through the n		ttach a full and complete copy of the will and/			
or trust and all amendments.	······································	······			
	CERTIFICATION				
		foregoing and all information hereon, including any d that I am the parent or child (or transferor's legal			
		d 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					
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	PRINTED NAME	DATE			
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	PRINTED NAME	DATE			
MAILING ADDRESS	<u> </u>	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 transfere	e(s)		
2.	Family relationship(s) to trans	feror(s)		
	If adopted, age at time of ado	ption		
			married to or in a registered dom on the date of purchase or transfer	estic partnership <i>(registered means</i> ?       Yes        No
	If <b>no</b> , was the marriage or reg	istered domestic partnership termi	nated by: $\Box$ Death $\Box$ Divorce	e/Termination of partnership
	If terminated by death, had the or transfer? $\Box$ Yes $\Box$ N		entered into a registered domestic p	artnership as of the date of purchase
		ed, was the child-in-law still married es $\Box$ No	d to or in a registered domestic par	tnership with the child on the date of
	If <b>no,</b> was the m <mark>arriage or rec</mark>	istered domestic partnership termi	nated by: 🗌 Death 🔲 Divorce/	Termination of partnership
	If terminated by death, had the or transfer? □ Y <mark>es</mark> □ N		entered into a <mark>re</mark> giste <mark>re</mark> d domestic p	partnership as of the date of purchase
3.			l property transferred exceeds the c nt and alloc <mark>ati</mark> on of the exclusion th	one million dollar value exclusion, the at is being sought.)
		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)

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.

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