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

NAME AND MAILING ADDRESS

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



Katrina Bartolomie MENDOCINO COUNTY ASSESSOR 501 Low Gap Road, Room 1020 Ukiah, CA 95482 Telephone: (707) 234-6800 Fax: (707) 463-6597

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L		
A. PROPERTY		
ASSESSOR'S PARCEL/ID 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 (<i>if applicable</i>)
		The stress Deside seasting and the stress Title 40 lifeting
		Taxation Code section 63.1. [See Title 42 United identification purposes in the administration of any
		ntification number issued by the Internal Revenue
Service. The numbers are used by the Assessor		
B. TRANSFEROR(S)/SELLER(S) (additional tr	ansferors please complete Section D on the	reverse)
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		
Was this property the transferor's principal		
If yes , please check which of the following	exemptions was granted or was eligible to b	e granted on this property:
☐ Homeowners' Exemption ☐ Disabled	Veterans' Exemption	
5. Have there been other transfers that qualifi	ed for this ex <mark>clu</mark> sion?	
		list should include for each property: the County, yers, and family relationship. Transferor's principal
 6. Was only a partial interest in the property to 	ansferred? Ves No. If ves percer	tage transferred %
7. Was this property owned in joint tenancy?		ttach a full and complete copy of the will and/
or trust and all amendments.	medium of a win and/or trust, you must a	ttach a full and complete copy of the will and
	CERTIFICATION	
	er the laws of the State of California that the	foregoing and all information hereon, including any
		nd that I am the parent or child (or transferor's legal
of my principal residence under Revenue and Tax		nd will not file a claim to transfer the base year value
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	PRINTED NAME	DATE
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	PRINTED NAME	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	RANSFEREE(S)/BUYER(S) (additional transferees please complete Section E below)					
1.	. Print full name(s) of transferee(s)					
2.	. Family relationship(s) to transferor(s)					
	If adopted, age at time of adoption					
	If stepparent/stepchild relationship is involved, was parent still married to or in a registered d registered with the California Secretary of State) with stepparent on the date of purchase or trans					
	If no, was the marriage or registered domestic partnership terminated by: 🛛 Death 🖓 Divorce/Termination of partnership					
	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 c purchase or transfer? \Box Yes \Box No					
	If no , was the marriage or registered domestic partnership terminated by: Death Divor	rce/Termination of partnership				
	If terminated by death, had the surviving child-in-law remarried or entered into a registered domest or transfer?	ic partnership as of the date of purchase				
3.	ALLOCATION OF EXCLUSION (If the full cash value of the real property transferred exceeds the transferree must specify on an attachment to this claim the amount and allocation of the exclusion					
	CERTIFICATION					
accom repres the Re	fy (or declare) under penalty of perjury under the laws of the State of California that the foregoing a npanying statements or documents, is true and correct to the best of my knowledge and that I am sentative) of the transferors listed in Section B; and that all of the transferees are eligible transferees evenue and Taxation Code.	the parent or child (or transferee's legal				
MAILING	G ADDRESS DAYTIME PHC)				
CITY, ST	TATE, ZIP	35				
Note:	The Assessor may contact you for additional information.					
D. AD	DDITIONAL 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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