EF-58-AH-R18-0617-24000338-1 BOE-58-AH (P1) REV. 18 (06-17)

CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD



MERCED COUNTY MATT H. MAY, ASSESSOR

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

1								
A. PROPERTY								
ASSESSOR'S PARCEL 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 (if applicable)						
States Code, section 405(c)(2)(C)(i) which author	rizes the use of social security numbers for cial security number may provide a tax ide and the state to monitor the exclusion limit.	Taxation Code section 63.1. See Title 42 United identification purposes in the administration of any ntification number issued by the Internal Revenue						
Print full name(s) of transferor(s)								
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 residence? Yes No							
	If yes , please check which of the following exemptions was granted or was eligible to be granted on this property:							
☐ Homeowners' Exemption ☐ Disable		o granted on and property.						
	5. Have there been other dæ) • △\s that qualified for this exclusion? Á □ Yes □ No							
If yes, please attach a list of all previous	tr <mark>an</mark> sfers tha <mark>t qualified for this exclusion. (Th</mark>	nis list should include for each property: the County, yers, and family relationship. Transferor's principal						
6. Was only a partial interest in the property transferred? Yes No If yes, percentage transferred %								
7. Was this property owned in joint tenancy	7. Was this property owned in joint tenancy? Yes No							
 If the transfer was through the medium o amendments. 	f a will and/or trust, you must attach a full an	d complete copy of the will and/or trust and all						
	CERTIFICATION							
accompanying statements or documents, is true	and correct to the best of my knowledge an on C. I knowingly am granting this exclusion	foregoing and all information hereon, including any d that I am the parent or child (or transferor's legal n and will not file a claim to transfer the base year						
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. TI	RANSFEREE(S)/BUYER(S) (8	additional transferees please co	mplete "C" below	<i>(</i>)				
1.	Print full name(s) of transfere	ee(s)						
2.	Family relationship(s) to transferor(s)							
	f adopted, age at time of adoption							
	If stepparent/stepchild relationship is involved, was parent still married to or in a registered domestic partnership (registered in registered with the California Secretary of State) with stepparent on the date of purchase or transfer?							
	f no, was the marriage or registered domestic partnership terminated by: $\ \square$ Death $\ \square$ 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 programmer or transfer? \square Yes \square 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 the 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: \square Death \square Divorce/Termination of partnership							
	If terminated by death, had the the date of purchase or trans		nter-in-law reman	ried or entered into a reg	gistered d <mark>omes</mark> tic partnership as o			
3.	ALLOCATION OF EXCLUSION (If the full cash value of the real property transferred exceeds the one million dollar value exclusion, the transferee must specify on an attachment to this claim the amount and allocation of the exclusion that is being sought.)							
		CER'	TIFICATION					
represe the Re	panying statements or docume entative) of the transferors list evenue and Taxation Code.	ents, is true and correct to the bed in Section B; and that all of the	est of my knowle	edge and that I am the p be eligible transferees with	Il information hereon, including any arent or child (or transferee's legal thin the meaning of section 63.1 or			
SIGNATU	JRE OF TRANSFEREE OR LEGAL REP	RESENTATIVE PRINTED NAME		DATE				
MAILING	SADDRESS	JMBER						
CITY, ST	ATE, ZIP)()		() EMAIL ADDRESS				
Note:	The Assessor may contact you	for additional information.						
		B. ADDITIONAL TRANSFI	EROR(S)/SELLE	ER(S) (continued)				
	NAME	SOCIAL SECURITY NUMBER	ER S	SIGNATURE	RELATIONSHIP			
		C. ADDITIONAL TRANSF	FREE(S)/BUYE	R(S) (continued)				
		NAME	LIVEE (O) / BOTE	n(o) (commaca)	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.

