| -58-H-R01-1212-24000478-1<br>E-58-H REV. 01 (12/12)<br>AFFIDAVIT OF COTENANT RESIDENCY  | MERCED COUNTY<br>MATT H. MAY, ASSESSOR<br>2222 M STREET<br>MERCED, CA 95340<br>TELEPHONE (209) 385-7631<br>FAX (209) 725-3956<br>www.co.merced.ca.us\assessor  |
|---|--|
| NAME AND MAILING ADDRESS<br>(Make necessary corrections to the printed name and mailing address)<br>Г   | Under the provisions of Revenue and Taxation Code section 62.3, if certain conditions are met, a transfer of a cotenanc  |
| L   | interest in real property from one cotenant to the other<br>cotenant that takes effect upon the death of one cotenant<br>not a change in ownership. This applies to transfers that<br>occur on or after January 1, 2013.   |
| The change in ownership exclusion for a transfer of an interest in reapplies as long as all of the following are met:   | eal property between cotenants that takes effect upon the death of one cotenant  |
| <ul> <li>The transfer is solely by and between two individuals who toge</li> <li>As a result of the death of the transferor cotenant, the decease resulting in the surviving cotenant owning 100 percent of the resulting in the surviving cotenant owning 100 percent of the result of the one-year period immediately preceding the death of th</li> <li>The real property was the principal residence of both cotenant</li> <li>For the one-year period immediately preceding the death of th</li> </ul> | he transferor cotenant, both of the cotenants were owners of record.<br>Its immediately preceding the transferor cotenant's death.<br>The transferor cotenant, both of the cotenants continuously resided in the real property affidavit affirming that he or she continuously resided in the real property with the |
| NAME OF SURVIVING COTENANT  |  |
| NAME OF DECEASED COTENANT STREET ADDRESS OF REAL PROPERTY CITY, STATE, ZIP CODE   | DATE OF DEATH ASSESSOR'S PARCEL NUMBER (APN)   |
| Property was eligible for:  Homeowners' Exemption   | Disabled Veterans' Exemption   |
| Disposition of real property:   |  |
| Affidavit of death of joint tenant  |  |
| Decree of distribution pursuant to will or intestate succession   |  |
| Action of trustee pursuant to terms of trust (Attach a complete complete)   |  |
| 1. Was this real property the principal residence of the deceased col   | otenant the one-year period prior to the date of death?  Yes No  |
| 2. Was this real property the principal residence of the surviving cote   | enant the one-year period prior to the date of death?  Yes  No   |
| 3. Are there any other beneficiaries of the real property?  | s 🗌 No   |
| If yes, please list other beneficiaries:  |  |
| CERTIFIC  | CATION OF COTENANT   |
| I certify (or declare) under penalty of perjury under the laws of   | the State of California that the foregoing and all information hereon, including<br>act to the best of my knowledge and that I continuously resided with the   |
| SIGNATURE OF SURVIVING COTENANT   | DATE   |

EMAIL ADDRESS

## THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

TELEPHONE NUMBER

