CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD



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Joseph E. Holland **County Clerk, Recorder and Assessor** P.O. Box 159, Santa Barbara, CA 93102-0159 Santa Barbara (805) 568-2550 Santa Maria (805) 346-8310

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

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A. PROPERTY					
ASSESSOR'S PARCEL/ID NUMBER		\mathbf{C}			
PROPERTY ADDRESS RECORDER'S DOCUMENT NUMBER		CITY 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 sial security number may provide a tax ide	Taxation Code section 63.1. [See Title 42 United identification purposes in the administration of any entification number issued by the Internal Revenue			
B. TRANSFEROR(S)/SELLER(S) (additional tra	ansferors please complete Section D on the	reverse)			
1. Print full name(s) of transferor(s)					
2. Social security number(s) —	2. Social security number(s)				
3. Family relationship(s) to transferee(s)					
If adopted, age at time o <mark>f a</mark> doption					
4. Was this property the transferor's principal r	esidence? 🗆 Yes 🗖 No				
If yes, please check which of the following e	exemptions was granted or was eligible to b	e granted on this property:			
☐ Homeowners' Exemption ☐ Disabled V	eterans' Exemption				
5. Have there been other transfers that qualifie		-			
		list should include for each property: the County, yers, and family relationship. Transferor's principal			
6. Was only a partial interest in the property tra	ansferred? 🗌 Yes 🔲 No If yes, percer	ntage transferred%			
7. Was this property owned in joint tenancy?	🗆 Yes 🔲 No				
<u>IMPORTANT</u> : If the transfer was through the n or trust and all amendments.	nedium of a will and/or trust, you must a	ttach a full and complete copy of the will and/			
	CERTIFICATION				
accompanying statements or documents, is true	and correct to the best of my knowledge an	foregoing and all information hereon, including any nd that I am the parent or child (or transferor's legal nd will not file a claim to transfer the base year value			
of my principal residence under Revenue and Tax. SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	ation Code section 69.5.	DATE			
		DATE			
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	PRINTED NAME	DATE			
MAILING ADDRESS	1	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	ditional transferees please complete	Section E	below)	
1.	Print full name(s) of transferee	e(s)			
2.	Family relationship(s) to trans	eror(s)			
	If adopted, age at time of adopted	tion			
	If stepparent/stepchild relation registered with the California S	nship is involved, was parent still n Secretary of State) with stepparent o	narried to o In the date o	r in a registered of purchase or tra	l domestic partnership <i>(registered means</i> ansfer? Yes No
	If no, was the marriage or reg	stered domestic partnership termina	ated by:	🗆 Death 🛛 D	ivorce/Termination of partnership
	If terminated by death, had the or transfer? \Box Yes \Box N		ntered into a	registered dome	estic partnership as of the date of purchase
	·	d, was the child-in-law still married es 🛛 No	to or in a re	gistered domesti	ic partnership with the child on the date o
	If no, was the marriage or reg	stered domestic partnership termina	ated by:	🗌 Death 🔲 Div	vorce/Termination of partnership
	If terminated by death, had the or transfer?		ntered into a	a registered dome	estic partnership as of the date of purchase
3.		ON (If the full cash value of the real attachme <mark>nt</mark> to th <mark>is</mark> claim the amount			the one million dollar value exclusion, the ion that is being sought.)
		CERTIFIC	ATION		
accom repress the Re	panying statements or docume	nts, is true and correct to the best o d in Section B; and that all of the tra	f m <mark>y k</mark> nowle	edg <mark>e</mark> and that I a	g and all information hereon, including any m the parent or child (or transferee's lega rees within the meaning of section 63.1 o
MAILING	ADDRESS			DAYTIME F	PHONE NUMBER
CITY, ST	ATE, ZIP				DRESS
Note:	The Assessor may contact you	or additional information.	V		
D. AD	DITIONAL TRANSFEROR(S)	SELLER(S)			
	NAME	SOCIAL SECURITY NUMBER	5	GIGNATURE	RELATIONSHIP

E. ADDITIONAL TRANSFEREE(S)/BUYER(S)

RELATIONSHIP



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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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