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



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

L		
A. PROPERTY		
ASSESSOR'S PARCEL/ID NUMBER		\mathbf{C}
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 ind the state to monitor the exclusion limit.	Taxation Code section 63.1. [See Title 42 United identification purposes in the administration of any entification number issued by the Internal Revenue 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		
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	ed for this exclusion?	-
		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	
IMPORTANT: 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/
accompanying statements or documents, is true representative) of the transferees listed in Section	and correct to the best of my knowledge ar C. I knowingly am granting this exclusion a	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 Taxa 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	ANSFEREE(S)/BUYER(S) (ac	lditional transferees	please comple	te Section I	E below)		
1.	Print full name(s) of transferee	e(s)					
2.	Family relationship(s) to trans	feror(s)					
	If adopted, age at time of ado	ption					
	If stepparent/stepchild relatio registered with the California						partnership <i>(registered means</i>] Yes □ No
If no, was the marriage or registered domestic partnership terminated by: 🛛 Death 🛛 Divorce/Termination of partners						mination of partnership	
If terminated by death, had the surviving stepparent remarried or entered into a registered domestic partnership as of t or transfer? \Box Yes \Box No					ership as of the date of purchase		
	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 dat purchase or transfer? 🛛 Yes 🗋 No					hip with the child on the date of	
	If no, was the marriage or registered domestic partnership terminated by: 🛛 Death 🔲 Divorce/Termination of partnership				nination of partnership		
 If terminated by death, had the surviving child-in-law remarried or entered into a registered domestic partnership as of the date of puor transfer? Yes No 3. ALLOCATION OF EXCLUSION (If the full cash value of the real property transferred exceeds the one million dollar value exclusion transferee must specify on an attachment to this claim the amount and allocation of the exclusion that is being sought.) 				ership as of the date of purchase			
			CERTIFI	CATION			
accom repres the Re	panying statements or docume	nts, is true and corr d in Section B; and	ect to the best that all of the ti	of my know	ledg <mark>e and that</mark>	I am the pare asferees withir	formation hereon, including any ent or child (or transferee's legal n the meaning of section 63.1 of
MAILING	ADDRESS			Λ	DAYT	IME PHONE NUMB	ER
CITY, ST	ATE, ZIP				EMAIL	ADDRESS	
Note:	The Assessor may contact you	for additional inform	ation.				
D. AD	DITIONAL TRANSFEROR(S)/	SELLER(S)					
	NAME	SOCIAL SECURI			SIGNATURE		RELATIONSHIP

NAME	SOCIAL SECURITY NUMBER	SIGNATURE	RELATIONSHIP
	1	 	

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

NAME	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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