EF-58-AH-R18-0617-58000246-1 BOE-58-AH (P1) REV. 18 (06-17)

CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD



Stephen S. Duckels Yuba County Assessor

915 8th Street, Suite 101 Marysville, CA 95901-5273 Phone: (530) 749-7820

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

L						
A. PROPERTY						
ASSESSOR'S PARCEL NUMBER						
PROPERTY ADDRESS		CITY				
RECORDER'S DOCUMENT NUMBER		DATE OF PURCHASE OR TRANSFER				
PROBATE NUMBER (if applicable)	OATE 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 ider and the state to monitor the exclusion limit.	Taxation Code section 63.1. See Title 42 United identification purposes in the administration of any otification number issued by the Internal Revenue				
Print full name(s) of transferor(s)						
Social security number(s)	2. Social security number(s)					
3. Family relationship(s) to transferee(s)	3. Family relationship(s) to transferee(s)					
If adopted, age at time of adoption						
4. Was this property the transferor's princip	4. Was this property the transferor's principal residence? Yes No					
	g exemptions was granted or was eligible to	be granted on this property:				
☐ Homeowners' Exemption ☐ Disable						
5. Have there been other dæ) • △\s that qua	·					
If yes , please attach a list of all previous	tr <mark>an</mark> sfers tha <mark>t qualified for this exclusion. (Th</mark>	is list should include for each property: the County, yers, and family relationship. Transferor's principal				
Was only a partial interest in the property	6. Was only a partial interest in the property 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 of amendments. 	f a will and/or trust, you must attach a full and	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 and 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 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



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C. T	RANSFEREE(S)/BUYER(S	S) (additional transferees please complete "C	" below)		
1.	Print full name(s) of transf	eree(s)			
2.	Family relationship(s) to tr	ransferor(s)			
	If adopted, age at time of				
	If stepparent/stepchild rel registered with the Califor	estic partnership <i>(registered mean</i> :? ☐ Yes ☐ No			
	If no , was the marriage or	ermination of partnership			
	If terminated by death, had or transfer? ☐ Yes ☐	artnership as of the date of purchase			
	If in-law relationship is invidaughter or son on the da	stered domestic partnership with the			
If no , was the marriage or registered domestic partnership terminated by: \Box Death \Box Divorce/Termination of partnership					
	If terminated by death, ha the date of purchase or tra	d the surviving son-in-law or daughter-in-law ansfer? ☐ Yes ☐ No	remarried or entered into a re	egistered domestic partnership as o	
3.		JSION (If the fu <mark>ll cash value of the real pr</mark> ope on a <mark>n attachment to this claim the amount</mark> and			
		CERTIFICATIO	ON		
accom repres	panying statements or doc	r of perjury under the laws of the State of Cal uments, is true and correct to the best of my listed in Section B; and that all of the transfe	knowledge and that I am the	parent or child (or transferee's lega	
SIGNATI	URE OF TRANSFEREE OR LEGAL F	REPRESENTATIVE PRINTED NAME	DATE		
MAILING	GADDRESS		DAYTIME PHONE I	NUMBER	
CITY, ST	ATE, ZIP)() /	() EMAIL ADDRESS		
Note:	The Assessor may contact y	you for additional information.			
	•	B. ADDITIONAL TRANSFEROR(S)	SELLER(S) (continued)		
	NAME	SOCIAL SECURITY NUMBER	SIGNATURE	RELATIONSHIP	
		C. ADDITIONAL TRANSFEREE(S). NAME	/BUYER(S) (continued)		
		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;
- 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.

