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

NAME AND MAILING ADDRESS

(Make necessary corrections to the printed name and mailing address.)



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Stephen S. Duckels Yuba County Assessor 915 8th Street, Suite 101 Marysville, CA 95901-5273 Phone: (530) 749-7820

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A. PROPERTY								
ASSESSOR'S PARCEL/ID NUMBER		\mathbf{C}						
PROPERTY ADDRESS		CITY						
RECORDER'S DOCUMENT NUMBER		DATE OF PURCHASE OR TRANSFER						
	ATE OF DEATH (if applicable)	DATE OF DECREE OF DISTRIBUTION (<i>if applicable</i>)						
States Code, section 405(c)(2)(C)(i) which author tax.] A foreign national who cannot obtain a soc Service. The numbers are used by the Assessor a	izes the use of social security numbers for ial security number may provide a tax ide nd the state to monitor the exclusion limit.	identification purposes in the administration of any ntification number issued by the Internal Revenue						
B. TRANSFEROR(S)/SELLER(S) (additional tra	nsferors please complete Section D on the	reverse)						
 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	4. Was this property the transferor's principal residence? □ Yes □ No							
If yes, please check which of the following e	exemptions was granted or was eligible to be	e granted on this property:						
☐ Homeowners' Exemption ☐ Disabled V	eterans' Exemption							
5. Have there been other transfers that qualifie	d for this exclusion?	-						
		list should include for each property: the County, ers, and family relationship. Transferor's principal						
6. Was only a partial interest in the property tra	ansferred? 🗌 Yes 🗌 No 🛛 If yes, percen	tage 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	tach a full and complete copy of the will and/						
	CERTIFICATION	· · · · · · · · · · · · · · · · · · ·						
accompanying statements or documents, is true a	and correct to the best of my knowledge an	foregoing and all information hereon, including any d that I am the parent or child (or transferor's legal d will not file a claim to transfer the base year value						
of my principal residence under Revenue and Taxi SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE								
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	PRINTED NAME	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	RANSFEREE(S)/BUYER(S) (additional transferees please	complete Section	E below)				
1.	. Print full name(s) of transferee(s)						
2.	. Family relationship(s) to transferor(s)						
	If adopted, age at time of adoption						
	If stepparent/stepchild relationship is involved, was paregistered with the California Secretary of State) with ste						
	If no, was the marriage or registered domestic partnership terminated by: 🛛 Death 🗍 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 purchas or transfer? 🛛 Yes 🗋 No						
	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 date or purchase or transfer? 🛛 Yes 🗋 No						
	If no, was the m <mark>arriage or register</mark> ed domestic partnership terminated by: 🛛 Death 🔲 Divorce/Termination of partnership						
	If terminated by death, had the surviving ch <mark>ild</mark> -in-law remains or transfer?	arried or entered int	o a <mark>re</mark> giste <mark>re</mark> d domestic partn	ership as of the date of purchase			
3.	 ALLOCATION OF EXCLUSION (If the full cash value of transferee must specify on an attachment to this claim the 						
		CERTIFICATION					
accom repres the Re	fy (or declare) under penalty of perjury under the laws of the npanying statements or documents, is true and correct to sentative) of the transferors listed in Section B; and that all evenue and Taxation Code.	he b <mark>est o</mark> f my know	vledg <mark>e</mark> and that I am the par	ent or child <mark>(o</mark> r transferee's legal			
MAILING	G ADDRESS		DAYTIME PHONE NUME	BER			
CITY, ST.	TATE, ZIP		EMAIL ADDRESS				
Note:	The Assessor may contact you for additional information.						
D. AD	DDITIONAL TRANSFEROR(S)/SELLER(S)						
	NAME SOCIAL SECURITY NU	MBER	SIGNATURE	RELATIONSHIP			

NAME	SOCIAL SECURITY NUMBER	SIGNATURE	RELATIONSHIP

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

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 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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