EF-19-C-R01-0522-54000319-1

## BOE-19-C (P1) REV. 01 (05-22) CERTIFICATION OF VALUE BY ASSESSOR FOR BASE YEAR VALUE TRANSFER



## Tara K. Freitas County Assessor/Clerk-Recorder

221 S. Mooney Blvd., Room 102-E Visalia, CA 93291-4593 Ph: (559) 636-5100 Fax: (559) 737-4468

County Assessor							
Address							
City, State, Zip	Replacement Residence APN						
	A of the California Constitution, implemented by Revenue and Taxat						

Name of Contact:	<u> </u>	Email Addr		00			Phone Nun	nber:			
·	CERTIFICA	ATION OF	VALUF		Number:	<b>/</b> :					
Name of Contact:  County Assessor's Office:					Address:						
· · · · · · · · · · · · · · · · · · ·	• •	CATION OF									
Was the property eligible for exemption? Yes  Did the applicant's name appear as an assessee immedi	,	If no, the recei			equest proof o	of reside		ie claim	ant.		
		ement Factored Base Year Value (prior to disaster): \$									
, Lance	\$			, , , ,							
as property substantially damaged or destroyed by a pernor-proclaimed disaster? Yes No No Factored Base Year Value (prior to					dan				ne property ged state?	Yes No	
PRINCIPAL RESIDENCE SUBSTANTIALLY DAMA				OR WHI							
Yes No If yes, what is the date of excl	•			oublinty po		20011 2.1		,			
For this applicant, has your county previously granted a b							article XIII	A (Pron	19)?		
Did the applicant's name appear as an assessee immedia	'				Yes	No	icy iroin the	Gairia			
\$ Was the property eligible for exemption? Yes	\$				unty must request proof of residency from the claimant.						
no, FMV allocated to primary residence: Land FMV				Improvement FMV							
Was entire property used as a primary residence? Yes No					Property description, if other than primary residence:						
\$Total Land Value: \$			To	otal Impro	vement Value	-· ¢					
Fair Market Value at Time of Sale:			<u> </u>		•		Multi	ple Bas	e Year (atta	ach explanation)	
Total Land FBYV: \$	Land Base Year: Total			***	t FBYV: \$			Ir	mp Base Ye	ear:	
Total Property FBYV (prior to sale): \$				oll Year (	/ear-year):						
Recorder's Document Number:				Date of Recording:							
Confirmation of Sale Price:				Confirmation of Date of Sale:							
B. REQUESTED INFORMATION											
Sale Price:				Date of Sale:							
County:				Assessor's Parcel/ID Number:							
Situs Address of Property Sold:					City:						
Applicant Name:					Application Date:						
A. ORIGINAL PRIMARY RESIDENCE (INFO					O THE AS	SESSO	OR BY TH	HE CL	AIMANT	)	
Please complete Section B of this form and return		•		•	, lollowing i	inomia		your	onioc.		
east age 55 or severely and permanently disable esidence to a replacement primary residence lo esidence has been filed with the priginal primary residence located in	cated anyv Cou	vhere in Cal	lifornia. <i>I</i> or's Offic	An appli ce. Sinc	ication for a e the claim	a base involv	year values the tra	e trans	sfer to a r of a base		
Section 2.1(b) of article XIII A of the California Co											