



Claude Parrish
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BOE-19-P (P1) REV. 00 (02-21)

**CLAIM FOR REASSESSMENT EXCLUSION FOR
 TRANSFER BETWEEN PARENT AND CHILD
 OCCURRING ON OR AFTER FEBRUARY 16, 2021**

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

☐ _____ ☐ _____

A. PROPERTY

ASSESSOR'S PARCEL/ID NUMBER _____

| | |
|---|---|
| PROPERTY ADDRESS _____ | CITY _____ |
| RECORDER'S DOCUMENT NUMBER _____ | DATE OF PURCHASE OR TRANSFER _____ |
| PROBATE NUMBER <i>(if applicable)</i> _____ | DATE OF DEATH <i>(if applicable)</i> _____ |
| | DATE OF DECREE OF DISTRIBUTION <i>(if applicable)</i> _____ |

B. TRANSFEROR(S)/SELLER(S) *(additional transfers please complete Section D on the reverse)*

| | | |
|---|--------------------|--------------------|
| Print full name(s) of transferor(s) _____ | Name _____ | Name _____ |
| Family relationship(s) to transferee(s) _____ | Relationship _____ | Relationship _____ |

1. If child was adopted, age at time of adoption? _____
2. Was this property the transferor's family farm? Yes No
3. Was this property the transferor's principal residence? Yes No
 If **yes**, please check which of the following exemptions was granted or was eligible to be granted on this property:
 Homeowners' Exemption Disabled Veterans' Exemption
4. Was only a partial interest in the property transferred? Yes No If **yes**, percentage transferred _____ %
5. Was this property owned in joint tenancy? Yes No

IMPORTANT: If the transfer was through the medium of a will and/or trust, you must attach a full and complete copy of the will and/or trust and all amendments.

CERTIFICATION

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true and correct to the best of my knowledge and that I am the parent or child (or transferor's legal representative) of the transferees listed in Section C.

| | | |
|--|--------------------|-----------------------------|
| 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. TRANSFEREE(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 child was adopted, age at time of adoption _____

If stepparent/stepchild relationship is involved, was parent still married to or in a registered domestic partnership ("registered" means registered with the California Secretary of State) with stepparent on the date of purchase or transfer? Yes No

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 purchase 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 of purchase or transfer? Yes No

If **NO**, was the marriage or registered domestic partnership terminated by: Death Divorce/Termination 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 purchase or transfer? Yes No

3. Is this property continuing to be used as the family farm by the transferee? Yes No

4. Is this property going to be the transferee's principal residence? Yes No

If Yes, please check which of the following exemptions for which a claim was filed and complete a, b, and c below. (Please note that the transferee must file for one of these exemptions within one year of the date of transfer.)

Homeowners' Exemption Disabled Veterans' Exemption Date Filed _____

a. Name of transferee who filed exemption claim _____

b. Date the transferee occupied this property as a principal residence _____ (month/day/year)

c. Does the transferee own another property that is or was their principal residence? Yes No

If Yes, please provide the address below and the move-out-date.

| | | |
|------------------|--------|--------------------------------|
| ADDRESS | COUNTY | ASSESSOR'S PARCEL/ID NUMBER |
| CITY, STATE, ZIP | | MOVE-OUT-DATE (month/day/year) |

CERTIFICATION

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true and correct to the best of my knowledge and that I am the parent or child (or transferee's legal representative) of the transferors listed in Section B.

| | | |
|--|-----------------------------|------|
| SIGNATURE OF TRANSFEREE OR LEGAL REPRESENTATIVE ▶ | PRINTED NAME | DATE |
| SIGNATURE OF TRANSFEREE OR LEGAL REPRESENTATIVE ▶ | PRINTED NAME | DATE |
| MAILING ADDRESS | DAYTIME PHONE NUMBER () | |
| CITY, STATE, ZIP | EMAIL ADDRESS | |

Note: The Assessor may contact you for additional information.

D. ADDITIONAL TRANSFEROR(S)/SELLER(S)

| PRINT NAME | SIGNATURE | RELATIONSHIP TO TRANSFEREE |
|------------|-----------|----------------------------|
| | | |
| | | |
| | | |

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

| PRINT NAME | RELATIONSHIP TO TRANSFEROR |
|------------|----------------------------|
| | |
| | |
| | |



BOE-19-P (P3) REV. 00 (02-21)

**CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD
OCCURRING ON OR AFTER FEBRUARY 16, 2021**

For transfers occurring on or after February 16, 2021, section 2.1(c) of article XIII A of the California Constitution provides that the terms “purchase” or “change in ownership” do not include the purchase or transfer of a family home between parents and their children, as long as the property was the family home of the transferor and continues as the family home of the transferee. A family home also includes a family farm.

For a family home, the transferee is required to file for the homeowners’ or disabled veterans’ exemption within one year of the date of transfer.

If the assessed value of the family home on the date of transfer exceeds the sum of the factored base year value plus \$1 million, the amount in excess of this sum will be added to the factored base year value.

A family farm is any real property that is under cultivation or being used for pasture or grazing, or that is used to produce any agricultural commodity. “Agricultural commodity” means any and all plant and animal products produced in this state for commercial purposes, including, but not limited to, plant products used for producing biofuels, and cultivated industrial hemp.

This claim form is for transfers occurring on or after February 16, 2021.

For transfers occurring on or before February 15, 2021, please file claim form BOE-58-AH, *Claim for Reassessment Exclusion for Transfer Between Parent and Child*.

NOTE: A county board of supervisors may 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.

