EF-19-C-R01-0522-04000294-1

County Assessor

Address

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



Alyssa Douglass Butte County Assessor

25 County Center Dr Suite 100 Oroville, CA 95965-3382 (530)552-3800

Email: assessorsoffice@buttecounty.net Website: www.buttecounty.net/assessor

BASE YEAR VALUE TRANSFER	CENTIFICATION OF VALUE BY ASSESSOR FOR	$\boldsymbol{\Gamma}$
	BASE YEAR VALUE TRANSFER	

City, State, Zip Replacer	nent Reside	nce APN										
Section 2.1(b) of article XIII A of the California east age 55 or severely and permanently disa residence to a replacement primary residence residence has been filed with the priginal primary residence located in	bled or a vic located any Co	tim of a wildf	fire or na lifornia. or's Offic	atural di An app ce. Sind	isaster to tra lication for a ce the claim	ansfer t a base n involv	heir base year valu es the tra	year e tran nsfer	value fro sfer to a of a bas	m an origin replaceme	al primary	
Please complete Section B of this form and ret	urn it to our	office at the a	address	above.								
A. ORIGINAL PRIMARY RESIDENCE (INF	ORMATION	I THAT WAS	S PROV	IDED 1	TO THE AS	SESS	OR BY TH	HE C	LAIMAN	T)		
Applicant Name:					Application Date:							
Situs Address of Property Sold:					City:							
County:					Assessor's Parcel/ID Number:							
Sale Price:					Date of Sale:							
B. REQUESTED INFORMATION			ļ									
Confirmation of Sale Price:				Confirmation of Date of Sale:								
Recorder's Document Number:				ate of R	ecording:							
Total Property FBYV (prior to sale): \$	tal Property FBYV (prior to sale): \$				Roll Year (year-year):							
Total Land FBYV: \$	Land Base Y	'ear:	Total Im	proveme	nt FBYV: \$			I	mp Base \	'ear:		
Fair Market Value at Time of Sale:							Multi	ple Bas	se Year (at	ttach explana	tion)	
Total Land Value: \$			To	Total Improvement Value: \$								
Was entire property used as a primary residence? Yes No					Property description, if other than primary residence:							
in no, i wit allocated to primary recidence.	and FMV			Improvement FMV								
Was the property eligible for exemption? Yes	No	f no, the receiv	ring count	y must re	equest proof o	of resider	ncy from the	claima	ant.			
Did the applicant's name appear as an assessee imme	diately prior to	the above-refe	renced tra	ansfer?	Yes	No						
For this applicant, has your county previously granted a Yes No If yes, what is the date of e	•	lue transfer for	age or dis	sability p	ursuant to Se	ction 2.1	article XIII	A (Prop	o 19)?			
PRINCIPAL RESIDENCE SUBSTANTIALLY DAN	IAGED/DEST	ROYED BY DIS	SASTER F	OR WH	ICH THE GOV	VERNOR	DECLARE	DAS	TATE OF I	EMERGENC)		
Was property substantially damaged or destroyed by a Governor-proclaimed disaster? Yes No		ster (if applicab			Type of disa			Was t		y sold in its	No	
Fair Market Value immediately prior to disaster:	Factored Ba	se Year Value (prior to d	isaster):	Roll Year (ye	ear-year)	:					
Land Factored Base Year Value (prior to disaster): \$		In	nproveme	nt Factor	red Base Year	r Value (p	orior to disa	ster): \$	5			
Was the property eligible for exemption?	No	If no, the recei	iving cour	nty must	request proof	of reside	ency from th	e clain	nant.			
Did the applicant's name appear as an assessee imme	ediately prior to	the above-refe	erenced tr	ransfer?	Yes	No)					
Name of Contact:	CERTIFI	CATION OF	VALUE		VIDED BY: I Address:							
County Assessor's Office:				Phone	e Number:							
	CERTIFIC	ATION OF	VALUE	REQL	JESTED B	Y:						
Name of Contact:		Email Addr					Phone Nun	nber:				

