BOE-64 (P1) REV. 11 (05-21)



CLAIM FOR SEISMIC SAFETY CONSTRUCTION EXCLUSION FROM ASSESSMENT

This claim must be filed with the Assessor prior to, or within 30 days of, completion of construction.

Diane Brown **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

| CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and I | mailing address) | | | |
|--|--|--------------------|--------------------------|----------|
| Γ | | | FOR ASSESSOR'S USE ONLY | |
| | | | DATE RECEIVED | ED |
| L | ٦ | | | |
| CLAIMANT'S NAME (PLEASE PRINT) | | | ASSESSOR'S PARCEL NUMBER | |
| STREET ADDRESS (IF DIFFERENT THAN MAILING ADDRESS) | | CITY | I | ZIP CODE |
| DATE (OR ANTICIPATED DATE) OF COMPLETION | DAYTIME TELEPHONE NUMBER | E-MAIL ADDRESS | | |
| building department | primary contractor, civil those portions of the proj ation Code section 74.5(b | ect that are seisi | | |
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Section 74.5 of the Revenue and Taxation Code excludes from assessment that portion of an existing structure that consists of the construction and reconstruction of seismic components.

In order to receive the exclusion, this claim form must be filed with the assessor prior to, or within 30 days of, completion of the project. All documents necessary to support the exclusion must be filed with the Assessor by the property owner not later than six months after completion of the project.

The property owner, primary contractor, civil or structural engineer, or architect shall certify to the building department those portions of the project that are seismic retrofitting components, as defined by Revenue and Taxation Code section 74.5(b)(2). Upon completion of the project, the building department shall report to the Assessor the costs of the portions of the project that are seismic retrofitting components.

For purposes of section 74.5(b):

- (1) "Seismic retrofitting components" means seismic retrofitting improvements and improvements utilizing earthquake hazard mitigation technologies.
- (2) "Seismic retrofitting improvements" means retrofitting or reconstruction of an existing building or structure, to abate falling hazards from structural or nonstructural components of any building or structure including, but not limited to, parapets, appendages, cornices, hanging objects, and building cladding that pose serious danger. "Seismic retrofitting improvements" also means either structural strengthening or providing the means necessary to resist seismic force levels that would otherwise be experienced by an existing building or structure during an earthquake, so as to significantly reduce hazards to life and safety while also providing for the substantially safe ingress and egress of building occupants during and immediately after an earthquake. "Seismic retrofitting improvements" does not include alterations, such as new plumbing, electrical, or other added finishing materials, made in addition to seismic-related work performed on an existing structure. "Seismic retrofitting" includes, but is not limited to, those items referenced in Appendix A of the International Existing Building Code of the International Code Council.
- (3) "Improvements utilizing earthquake hazard mitigation technologies" means improvements to existing buildings identified by a local government as being hazardous to life in the event of an earthquake. These improvements shall involve strategies for earthquake protection of structures. These improvements shall use technologies such as those referenced in Part 2 (commencing with Section 1.1.1) of Title 24 of the California Building Code and similar seismic provisions in the International Building Code.

THIS EXCLUSION EXPIRES UPON CHANGE IN OWNERSHIP OF THE PROPERTY

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| 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, correct and complete to the best of my knowledge and belief. | | | | |
| SIGNATURE OF PERSON MAKING CLAIM | DATE | | | |

