EF-58-AH-R20-0520-09000647-1 BOE-58-AH (P1) REV. 20 (05-20)

CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD



JON DEVILLE, ASSESSOR 360 FAIR LN. PLACERVILLE, CA 95667

EL DORADO COUNTY

TEL. 530-621-5719

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

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|--|---|---|--|--|--|--|--|
| A. PROPERTY | <u> </u> | | | | | | |
| ASSESSOR'S PARCEL NUMBER | | | | | | | |
| PROPERTY ADDRESS | DATE OF PURCHASE OR TRANSFER | | | | | | |
| RECORDER'S DOCUMENT NUMBER | | | | | | | |
| PROBATE NUMBER (if applicable) | DATE OF DEATH (if applicable) | DATE OF DECREE OF DISTRIBUTION (if applicable) | | | | | |
| States Code, section 405(c)(2)(C)(i) which author | rizes the use of social security numbers cial security number may provide a tax | and Taxation Code section 63.1. [See Title 42 United is for identification purposes in the administration of any identification number issued by the Internal Revenue it. | | | | | |
| B. TRANSFEROR(S)/SELLER(S) (additional tra | | | | | | | |
| Print full name(s) of transferor(s) | , | _ | | | | | |
| Social security number(s) | | | | | | | |
| 3. Family relationship(s) to transferee(s) — | | | | | | | |
| If adopted, age at time of adoption | | _ | | | | | |
| Was this property the transferor's principal i | residence? 🗆 Yes 🗆 No | | | | | | |
| If yes , please check which of the following | | to be granted on this property: | | | | | |
| ☐ Homeowners' Exemption ☐ Disabled \ | | to so granica on the property. | | | | | |
| Have there been other transfers that qualifier | • | | | | | | |
| If yes, please attach a list of all previous tra | unsfers that qualified for this exclusion. (| This list should include for each property: the County, As- rs, and family relationship. Transferor's principal residence | | | | | |
| 6. Was only a partial interest in the property tra | 6. Was only a partial interest in the property transferred? \Box Yes \Box No \Box If yes , percentage transferred% | | | | | | |
| 7. Was this property owned in joint tenancy? | ☐ Yes ☐ No | | | | | | |
| IMPORTANT : If the transfer was through the n trust and all amendments. | nedium of a will and/or trust, you mu | st attach a full and complete copy of the will and/or | | | | | |
| | CERTIFICATION | | | | | | |
| accompanying statements or documents, is true | and correct to the best of my knowledg C. I knowingly am granting this exclusion | t the foregoing and all information hereon, including any e and that I am the parent or child (or transferor's legal on and will not file a claim to transfer the base year value | | | | | |
| | 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



| Print full name(s) of trail | nsferee(s) | | | | |
|---|------------------------------|--|-----------------------|----------------------|---|
| 2. Family relationship(s) to | o transferor(s) | | | | |
| If adopted, age at time | of adoption | | | | |
| | | volved, was parent still n f State) with stepparent o | | | partnership <i>(registered means</i> □ Yes □ No |
| If no , was the marriage | or registered don | nestic partnership termina | ated by: \Box Deat | h ☐ Divorce/Ter | mination of partnership |
| | nad the surviving s | stepparent remarried or er | ntered into a registe | red domestic partne | ership as of the date of purchase |
| If in-law relationship is purchase or transfer? | involved, was the ☐ Yes ☐ No | child-in-law still married | to or in a registered | domestic partners | ship with the child on the date of |
| If no , was the marriage | or registered don | nestic partnership termina | ated by: Death | n 🗌 Divorce/Terr | nination of partnership |
| If terminated by death, hor transfer? \Box Yes | | hild-in-law remarried or e | ntered into a registe | red domestic partn | ership as of the date of purchase |
| | | ull cash value of the real _l t to this claim the amount | | | nillion dollar value exclusion, the being sought.) |
| | | CERTIFIC | ATION | | |
| representative) of the transferonthe Revenue and Taxation Cod | e. | PRINTED NAME | nsferees are eligibl | DATE | n the meaning of section 63.1 o |
| SIGNATURE OF TRANSFEREE OR LEGA | AL REPRESENTATIVE | THINTES IV WIL | | DATE | |
| MAILING ADDRESS | | | | DAYTIME PHONE NUMBER | |
| CITY, STATE, ZIP | | | | EMAIL ADDRESS | |
| Note: The Assessor may contact | ct you for addition | al information. | | I | |
| | D | . ADDITIONAL TRANSF | EROR(S)/SELLER | (S) | |
| NAME | SOCIAL | SECURITY NUMBER | SIGNATURE | | RELATIONSHIP |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | E | E. ADDITIONAL TRANSF | EREE(S)/BUYER(| S) | |
| | E | E. ADDITIONAL TRANSF | FEREE(S)/BUYER(| S) | RELATIONSHIP |
| | E | | EREE(S)/BUYER(| S) | RELATIONSHIP |
| | E | | EREE(S)/BUYER(| S) | RELATIONSHIP |
| | E | | FEREE(S)/BUYER(| S) | RELATIONSHIP |
| | E | | FEREE(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.
- 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. California law 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 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.

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