EF-58-AH-R16-0514-24000829-1 BOE-58-AH (P1) REV. 16 (05-14)

## **CLAIM FOR REASSESSMENT EXCLUSION FOR** TRANSFER BETWEEN PARENT AND CHILD



## **MERCED COUNTY** MATT H. MAY, ASSESSOR

2222 M STREET MERCED, CA 95340 TELEPHONE (209) 385-7631 FAX (209) 725-3956 www.co.merced.ca.us\assessor

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

	1						
A. PR	ROPERTY						
ASSESSO	DR'S PARCEL NUMBER						
			Law				
PROPER	TY ADDRESS	CITY					
RECORD	ER'S DOCUMENT NUMBER	DATE OF PURCHASE OR TRANSFER					
PROBATE NUMBER (if applicable)		DATE OF DEATH (if applicable)	DATE OF DECREE OF DISTRIBUTION (if applicable)				
States tax.] A Service	Code, section 405(c)(2)(C)(i) which auth foreign national who cannot obtain a se. The numbers are used by the Assesso	norizes the use of social security numbers fo	Taxation Code section 63.1. [See Title 42 United r identification purposes in the administration of any entification number issued by the Internal Revenue				
		transferors prease complete B on the revers	se/				
	Print full name(s) of transferor(s)						
	Social security number(s)						
3.							
	If adopted, age at time of adoption						
4.	Was this property the transferor's principal residence? ☐ Yes ☐ No						
	If <b>yes</b> , please check which of the following exemptions was granted or was eligible to be granted on this property:						
_	☐ Homeowners' Exemption ☐ Disabled Veterans' Exemption						
5.	Have there been other dæ) • △ s that qualified for this exclusion? Á ☐ Yes ☐ No  If yes, please attach a list of all previous transfers that qualified for this exclusion. (This list should include for each property: the County,						
			nis list should include for each property: the County, uyers, and family relationship. Transferor's principal				
6.	5. Was only a partial interest in the property transferred?   Yes   No If yes, percentage transferred   %						
7.	Was this property owned in joint tenand	:y? □ Yes □ No					
8.	If the transfer was through the medium	of a trust, you must attach a copy of the trus	t.				
		CERTIFICATION					
accom <sub>i</sub> represe value c	panying statements or documents, is truentative) of the transferees listed in Sec of my principal residence under Revenue	e and correct to the best of my knowledge a tion C. I knowingly am granting this exclusion and Taxation Code section 69.5.	e foregoing and all information hereon, including any nd that I am the parent or child (or transferor's legal on and will not file a claim to transfer the base year				
	JRE ÓF TRANSFEROR OR LEGAL REPRESENTATIV	DATE					
	JRE OF TRANSFEROR OR LEGAL REPRESENTATIV	E	DATE				
MAJI INIO	ADDRESS		DAYTIME BUONE AND DEP				
IVIAILING	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.	TF	ANSFEREE(S)/BUYER(S) (a	dditional transferees please comple	te "C" below)				
	1.	Print full name(s) of transferee	e(s)					
2	2.	Family relationship(s) to transf	feror(s)					
		If adopted, age at time of adoption						
		If stepparent/stepchild relationship is involved, was parent still married to or in a registered domestic partnership (registered mea registered with the California Secretary of State) with stepparent on the date of purchase or transfer? $\square$ Yes $\square$ No						
		If <b>no</b> , was the marriage or regi	rmination 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? $\square$ Yes $\square$ No						
		If in-law relationship is involved, was the son-in-law or daughter-in-law still married to or in a registered domestic partnership with the daughter or son on the date of purchase or transfer? $\square$ Yes $\square$ No						
		If <b>no</b> , was the marriage or registered domestic partnership terminated by:   Death Divorce/Termination of partnership						
		If terminated by death, had the the date of purchase or transfer	e surviving son-in-law or daughter-ir er?    □  Yes    □  No	n-law remarried or e	ntered into a re	gistered domestic partnership as of		
;	3. ALLOCATION OF EXCLUSION (If the full cash value of the real property transferred exceeds the one million dollar value exclusion, the transferee must specify on an attachment to this claim the amount and allocation of the exclusion that is being sought.)							
			CERTIFIC	ATION				
acco repre the R	mp ese Rev	panying statements or document entative) of the transferors listed venue and Taxation Code.	erjury under the laws of the State onts, is true and correct to the best of in Section B; and that all of the tra	f my knowledge and	I that I am the perturn that I am the pertur	parent or child (or transferee's legal		
SIGNATURE OF TRANSFEREE OR LEGAL REPRESENTATIVE DATE				DATE	E			
	TU	RE OF TRANSFEREE OR LEGAL REPR	ESENTATIVE		DATE			
MAILIN	١G	ADDRESS			DAYTIME PHONE N	UMBER		
CITY, STATE, ZIP					( ) EMAIL ADDRESS			
Note	: 1	The Assessor may contact you f	for additional information					
		,,	B. ADDITIONAL TRANSFEROR	R(S)/SELLER(S) (C	ontinued)			
NAME		NAME	SOCIAL SECURITY NUMBER	SIGNATURE		RELATIONSHIP		
			C. ADDITIONAL TRANSFERE NAME	E(S)/BUYER(S) (co	ntinued)	DEL ATIONOUID		
			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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