EF-58-AH-R16-0514-26000690-1 BOE-58-AH (P1) REV. 16 (05-14)

CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD



Mono County Office of the Assessor Barry Beck, Assessor

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Email: assessor@mono.ca.gov

Website: www.monocounty.ca.gov/assessor

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

ı	ı							
A. PROPERTY								
ASSESSOR'S PARCEL NUMBER								
PROPERTY ADDRESS	CITY							
RECORDER'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 Code, section 405(c)(2)(C)(i) which	authorizes the use of social security nun a social security number may provide a ssor and the state to monitor the exclusion							
Print full name(s) of transferor(s)	na nanororo prodes comprete 2 on an							
Social security number(s)								
Family relationship(s) to transferee(
If adopted, age at time of adoption	s)							
4. Was this property the transferor's principal residence?								
,	eligible to be granted on this property:							
	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							
•	5. Have there been other dæ) • △\s that qualified for this exclusion? Á □ Yes □ No							
If yes, please attach a list of all pre-	If yes , please attach a list of all previous transfers that qualified for this exclusion. (This list should include for each property: the County Assessor's parcel number, address, date of transfer, names of all the transferees/buyers, and family relationship. Transferor's principal							
6. Was only a partial interest in the pro	6. Was only a partial interest in the property transferred? Yes No If yes , percentage transferred %							
7. Was this property owned in joint ter	7. Was this property owned in joint tenancy? ☐ Yes ☐ No							
8. If the transfer was through the med	um of a trust, you must attach a copy of	the trust.						
	CERTIFICATION							
accompanying statements or documents, is	true and correct to the best of my know Section C. I knowingly am granting this nue and Taxation Code section 69.5.	n that the foregoing and all information hereon, including any vledge and that I am the parent or child (or transferor's legal exclusion and will not file a claim to transfer the base year						
SIGNATURE OF TRANSPERON ON LEGAL NEFRESENT	DATE							
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENT	ATIVE	DATE						
>								
MAILING ADDRESS		DAYTIME PHONE NUMBER						
OLTY OTATE ZID		()						
CITY, STATE, ZIP		EMAIL ADDRESS						

(Please complete applicable information on reverse side.) THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

C.	TR	ANSFEREE(S)/BUYER(S) (a	dditional transferees please comple	ete "C" below)			
	1.	Print full name(s) of transferee	e(s)				
	2.	Family relationship(s) to trans	feror(s)				
		If adopted, age at time of ado	otion				
			nship is involved, was parent still Secretary of State) with stepparent				
		If no , was the marriage or reg	ination of partnership				
		If terminated by death, had the or transfer? \square Yes \square No	ership as of the date of purchase				
		ed domestic partnership with the					
daughter or son 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 terminated by:							
If terminated by death, had the surviving son-in-law or daughter-in-law remarried or entered into a registered domestic partnership the date of purchase or transfer? \Box Yes \Box No							
	3.		N (If the full cash value of the real attachment to this claim the amour				
			CERTIFIC	CATION			
acco repr	omp ese	panying statements or docume	perjury under the laws of the State of nts, is true and correct to the best of d in Section B; and that all of the tra	of my knowledge and	d that I am the par	ent or child (or transferee's legal	
SIGNATURE OF TRANSFEREE OR LEGAL REPRESENTATIVE DATE							
SIGNATURE OF TRANSFEREE OR LEGAL REPRESENTATIVE DATE							
MAILI	NG	ADDRESS			DAYTIME PHONE NUMI	BER	
() CITY, STATE, ZIP EMAIL ADDRESS							
Note	 e: T	The Assessor may contact you	for additional information				
			B. ADDITIONAL TRANSFERO	R(S)/SELLER(S) (c	ontinued)		
NAME		NAME	SOCIAL SECURITY NUMBER	SIGNATURE		RELATIONSHIP	
			C. ADDITIONAL TRANSFERE	F(S)/BUYFR(S) (co	ontinued)		
NAME						RELATIONSHIP	



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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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