EF-58-H-R02-0520-32000128-1 BOE-58-H REV 02 (05/20)

AFFIDAVIT OF COTENANT RESIDENCY



Cynthia L. Froggatt **Plumas County Assessor**

1 Crescent Street Quincy, CA 95971 Phone: 530-283-6380 Fax: (530) 283-6195

DATE

TELEPHONE NUMBER

 ${\bf Cindie Froggatt@county of plumas.com}$

| NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address) | |
|---|---|
| F L | Under the provisions of Revenue and Taxation Code section 62.3, if certain conditions are met, a transfer of a cotenancy interest in real property from one cotenant to the other cotenant that takes effect upon the death of one cotenant is not a change in ownership. This applies to transfers that occur on or after January 1, 2013. |
| | _ |
| The change in ownership exclusion for a transfer of an interest in real propert applies as long as all of the following are met: | ty between cotenants that takes effect upon the death of one cotenant |
| The transfer is solely by and between two individuals who together own As a result of the death of the transferor cotenant, the deceased cotenar resulting in the surviving cotenant owning 100 percent of the real propert For the one-year period immediately preceding the death of the transferor The real property was the principal residence of both cotenants immediately For the one-year period immediately preceding the death of the transferor The surviving cotenant must sign, under penalty of perjury, an affidavit and deceased cotenant for the one-year period immediately preceding the death of the deceased cotenant for the one-year period immediately preceding the deceased | ant's interest in the real property is transferred to the surviving cotenant, rty, and thereby terminating the cotenancy. For cotenant, both of the cotenants were owners of record. ately preceding the transferor cotenant's death. For cotenant, both of the cotenants continuously resided in the real property. affirming that they continuously resided in the real property with the |
| NAME OF SURVIVING COTENANT | |
| NAME OF DECEASED COTENANT | DATE OF DEATH |
| STREET ADDRESS OF REAL PROPERTY | ASSESSOR'S PARCEL NUMBER (APN) |
| CITY, STATE, ZIP CODE | <u> </u> |
| Property was eligible for: Homeowners' Exemption Disabled V Disposition of real property: Affidavit of death of joint tenant | Veterans' Exemption |
| Decree of distribution pursuant to will or intestate succession | |
| ☐ Action of trustee pursuant to terms of trust (Attach a complete copy of | of trust and all amendments) |
| 1. Was this real property the principal residence of the deceased cotenant for | the one-year period immediately preceding the date of death? \square Yes \square No |
| 2. Was this real property the principal residence of the surviving cotenant for the | the one-year period immediately preceding the date of death? $\;\;\square\;$ Yes $\;\;\square\;$ No |
| 3. Are there any other beneficiaries of the real property? | 0 |
| If yes, please list other beneficiaries: | |

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

CERTIFICATION OF COTENANT 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 and correct to the best of my knowledge and that I continuously resided with the decedent in



this real property for the one-year period immediately preceding the decedent's date of death.

SIGNATURE OF SURVIVING COTENANT

EMAIL ADDRESS