EF-58-AH-R21-0522-38003172-1 BOE-58-AH (P1) REV. 21 (05-22)

CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD



Joaquín Torres Assessor-Recorder 1 Dr. Carlton B. Goodlett Place City Hall - Room 190 San Francisco, CA 94102-4698

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

| ı | 1 | | | | | |
|--|--|---|--|--|--|--|
| A. PROPERTY | | | | | | |
| ASSESSOR'S PARCEL/ID 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 autho | rizes the use of social security numbers for cial security number may provide a tax ide | Taxation Code section 63.1. [See Title 42 United identification purposes in the administration of any ntification number issued by the Internal Revenue | | | | |
| B. TRANSFEROR(S)/SELLER(S) (additional tra | | reverse | | | | |
| Print full name(s) of transferor(s) | ansierors pieuse compiete decitori D on the | reverse | | | | |
| 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 | residence? | | | | | |
| , , , | exemptions was granted or was eligible to be | a granted on this property. | | | | |
| | | e granted on this property. | | | | |
| ☐ Homeowners' Exemption ☐ Disabled \ | · | | | | | |
| 5. Have there been other transfers that qualific | | 1:-4 -b | | | | |
| | | list should include for each property: the County, vers, and family relationship. Transferor's principal | | | | |
| 6. Was only a partial interest in the property tr | ansferred? \square Yes \square No $\:$ If yes , percen | tage transferred % | | | | |
| 7. Was this property owned in joint tenancy? | ☐ Yes ☐ No | | | | | |
| IMPORTANT: If the transfer was through the root trust and all amendments. | nedium of a will and/or trust, you must a | ttach a full and complete copy of the will and/ | | | | |
| | CERTIFICATION | | | | | |
| accompanying statements or documents, is true representative) of the transferees listed in Section | and correct to the best of my knowledge an C. I knowingly am granting this exclusion ar | foregoing and all information hereon, including any d that I am the parent or child (or transferor's legal nd will not file a claim to transfer the base year value | | | | |
| of my principal residence under Revenue and Tax SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE | ation Code section 69.5. | 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



| C. TRANSFEREE(S)/BUYER(| (S) (additional tran | nsferees please comple | te Section E below) | | | |
|---|-----------------------------|----------------------------|-------------------------|----------------------|---|--|
| 1. Print full name(s) of trar | ` , | | | | | |
| 2. Family relationship(s) to | | | | | | |
| If adopted, age at time of | · | | | | | |
| If stepparent/stepchild registered with the Calit | | | | | c partnership <i>(registered mean</i> : □ Yes □ No | |
| If no , was the marriage | or registered dom | nestic partnership termi | nated by: \Box Deat | h Divorce/Ter | mination of partnership | |
| If terminated by death, r or transfer? Γ Yes | | tepparent remarried or | entered into a registe | red domestic partn | ership as of the date of purchase | |
| If in-law relationship is i purchase or transfer? | nvolved, was the ☐ Yes ☐ No | child-in-law still marrie | d to or in a registered | domestic partners | ship with the child on the date o | |
| If no , was the marriage | or registered dom | nestic partnership termi | nated by: Death | n ☐ Divorce/Terr | nination of partnership | |
| If terminated by death, h or transfer? ☐ Yes | | hild-in-law remarried or | entered into a registe | red domestic partn | ership as of the date of purchase | |
| ALLOCATION OF EXC transferee must specify | | | | | million dollar value exclusion, the being sought.) | |
| | | CERTIFI | CATION | | | |
| representative) of the transferor the Revenue and Taxation Code SIGNATURE OF TRANSFEREE OR LEGA | e. | n B; and that all of the t | ransferees are eligibl | e transferees withi | n the meaning of section 63.1 o | |
| IGNATURE OF TRANSFEREE OR LEGAL REPRESENTATIVE PRINTED NAME | | | | DATE | | |
| MAILING ADDRESS | | | | DAYTIME PHONE NUMBER | | |
| CITY, STATE, ZIP | | | | () EMAIL ADDRESS | | |
| Note: The Assessor may contact | ct you for addition | al information. | | | | |
| D. ADDITIONAL TRANSFERO | R(S)/SELLER(S |) | | | | |
| NAME | SOCIAL | SECURITY NUMBER | SIGNATURE | | RELATIONSHIP | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| E. ADDITIONAL TRANSFERE | E(S)/BUYER(S) | | | | | |
| NAME | | | | | RELATIONSHIP | |
| | | | | | | |
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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 and on or before February 15, 2021.
- 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. Revenue and Taxation Code section 63.1 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.

For transfers occurring on or after February 16, 2021, please file form BOE-19-P, Claim for Reassessment Exclusion for Transfer Between Parent and Child Occurring on or After February 16, 2021.



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