EF-19-C-R03-0524-58000121-1 BOE-19-C (P1) REV. 03 (05-24)

CERTIFICATION OF VALUE BY ASSESSOR FOR BASE YEAR VALUE TRANSFER

Yuba County Assessor 915 8th Street, Suite 101 Marysville, CA 95901-5273

Stephen S. Duckels

Phone: (530) 749-7820

County Assessor

Address

City, State, Zip

Replacement Residence APN ______

Section 2.1(b) of article XIII A of the California Constitution, implemented by Revenue and Taxation Code section 69.6, allows a homeowner

who is at least age 55 or severely and perm original primary residence to a replacement perm Please complete Section B of this form and replacement permanent permanen	anently disabled or a vic primary residence located	ctim of a wildfi d anywhere in	re or natural disas California.		
A. ORIGINAL PRIMARY RESIDENCE (TO	O BE COMPLETED BY 1	THE REQUES	TING ASSESSOR	WITH INF	ORMATION FROM CLAIMANT)
Applicant Name:			Application Date:		
Situs Address of Property Sold:			City:		
County:			Assessor's Parcel/ID Number:		
Sale Price:			Date of Sale:		
B. REQUESTED INFORMATION (TO BE O	COMPLETED BY THE A	SSESSOR FR	OM COUNTY OF	ORIGINAL	. PRIMARY RESIDENCE)
Confirmation of Sale Price:			Confirmation of Date of Sale:		
Recorder's Document Number:			Date of Recording:		
Total Property FBYV (prior to sale): \$			Roll Year (year-year):		
Total Land FBYV: \$	Land Base Year:	Total Improvem	nprovement FBYV: \$ Imp Base Year:		Imp Base Year:
Fair Market Value at Time of Sale:				Mult	iple Base Year (attach explanation)
Total Land Value: \$			Total Improvement Value: \$		
Was entire property used as a primary residence?	Yes No Unkno	own Property	description, if other t	nan primary r	esidence:
If no, FMV allocated to primary residence: Land FMV \$			Improvement FMV \$		
Was the property receiving an exemption? Yes	No HOX	DVX If no, the	receiving county mus	t request pro	of of residency from the claimant.
Did the applicant's name appear as an assessee imme	ediately prior to the above-refe	erenced transfer?	Yes N	0	
PRINCIPAL RESIDENCE SUBSTANTIALLY DAI	MAGED/DESTROYED BY DIS	SASTER FOR W	HICH THE GOVERNO	OR DECLARI	ED A STATE OF EMERGENCY
Was property substantially damaged or destroyed by a Governor-proclaimed disaster? Yes No			Type of disaster (if	applicable):	Was the property sold in its damaged state? Yes No
Fair Market Value immediately prior to disaster: \$ Factored Base Year Value (prior to disaster): \$ Improvement					
Land Pactored base real value (prior to disaster).		mprovement Fac	ored Base Year Value	(prior to disa	aster): \$
Was the property eligible for exemption?	No If no, the rece	eiving county mus	t request proof of resi		ne claimant.
Did the applicant's name appear as an assessee imm	ediately prior to the above-ref	erenced transfer	Yes I		
COMMENTS:					
Name of Contact:	CERTIFICATION OF				
			Email Address:		
County Assessor's Office:		Pho	ne Number:		
	CERTIFICATION OF	VALUE REC	UESTED BY:		
Name of Contact:	Email Add	ress:		Phone Nur	mber:

