DEEDS.COM Official Deed Forms

CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD

DENNIS DRAEGER ASSESSOR-RECORDER-COUNTY CLERK COUNTY OF SAN BERNARDINO 172 West Third Street San Bernardino, CA 92415-0310

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

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 au	thorizes the use of social security num social security number may provide a or and the state to monitor the exclusion						
Print full name(s) of transferor(s)							
Social security number(s)							
3. Family relationship(s) to transferee(s)							
If adopted, age at time of adoption							
Was this property the transferor's prin	cipal residence? Yes No						
	wing exemptions was granted or was e	eligible to be granted on this property:					
☐ Homeowners' Exemption ☐ Disa							
·	5. Have there been other transfers that qualified for this exclusion? ☐ Yes ☐ No						
		sion. (This list should include for each property: the County erees/buyers, and family relationship. Transferor's principa					
6. Was only a partial interest in the prop	6. Was only a partial interest in the property transferred? Yes No If yes , percentage transferred %						
7. Was this property owned in joint tenancy? \square Yes \square No							
8. If the transfer was through the mediur	8. If the transfer was through the medium of a trust, you must attach a copy of the trust.						
	CERTIFICATION						
accompanying statements or documents, is tr	rue and correct to the best of my knowl tion C. I knowingly am granting this excl	that the foregoing and all information hereon, including any ledge and that I am the parent or child (or transferor's legalusion and will not file a claim to transfer the base year value DATE					
>							
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTAT	IVE	DATE					
MAILING ADDRESS	DAYTIME PHONE NUMBER ()						
CITY, STATE, ZIP	EMAIL ADDRESS						

(Please complete applicable information on reverse side.)

С. Т	RANSFEREE(S)/BUYER(S) (additional transferees please comple	ete "C" below)					
1.	Print full name(s) of transfere	ee(s)						
2.	Family relationship(s) to tran							
	If adopted, age at time of ado							
	If stepparent/stepchild relationship is involved, was parent still married to or in a registered domestic partnership (registere registered with the California Secretary of State) with stepparent on the date of purchase or transfer? \Box Yes \Box No							
	If no , was the marriage or registered domestic partnership terminated by: \Box Death \Box Divorce/Termination of partnership							
	If terminated by death, had the surviving stepparent remarried or entered into a registered domestic partnership as of the date of purch or transfer? Yes 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 daughter or son on the date of purchase or transfer? Yes No							
	If no , was the marriage or registered domestic partnership terminated by: \Box Death \Box Divorce/Termination of partnership							
	If terminated by death, had the surviving son-in-law or daughter-in-law remarried or entered into a registered domestic partnership as the date of purchase or transfer? $\ \square$ Yes $\ \square$ No							
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	CATION					
repres the Re	panying statements or docum entative) of the transferors list evenue and Taxation Code.	perjury under the laws of the State of ents, is true and correct to the best of ed in Section B; and that all of the true	of my knowledge and	d that I am the par le transferees withi	ent or child (or transferee's legal			
SIGNATI	SIGNATURE OF TRANSFEREE OR LEGAL REPRESENTATIVE DATE							
SIGNAT	URE OF TRANSFEREE OR LEGAL REP	RESENTATIVE		DATE				
MAILING ADDRESS DAYTIME PHONE NUMI					BER			
CITY, ST	ATE, ZIP			() EMAIL ADDRESS				
	CITI, STATE, ZIF							
Note:	The Assessor may contact you							
		B. ADDITIONAL TRANSFERO	R(S)/SELLER(S) (C	ontinued)	T			
NAME		SOCIAL SECURITY NUMBER	SIGNAT	URE	RELATIONSHIP			
		C. ADDITIONAL TRANSFERE	E(S)/BUYER(S) (co	ontinued)				
NAME					RELATIONSHIP			

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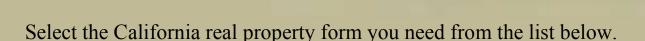
Revenue and Taxation Code, Section 63.1

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. **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 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.





California Quit Claim Deed Form: http://www.deeds.com/forms/california/quit-claim-deed/

California Warranty Deed Form: http://www.deeds.com/forms/california/warranty-deed/

California Special Warranty Deed Form: http://www.deeds.com/forms/california/special-warranty-deed/

California Grant Deed Form: http://www.deeds.com/forms/california/grant-deed/

California Interspousal Transfer Grant Deed: http://www.deeds.com/forms/california/interspousal-transfer-grant-deed/

California Grant Deed for Life Estate: http://www.deeds.com/forms/california/grant-deed-for-life-estate/

California Easement Deed Form: http://www.deeds.com/forms/california/easement-deed/

California Affidavit Death of Joint Tenant Forms: http://www.deeds.com/forms/california/affidavit-death-of-joint-tenant/

California Long Form Deed of Trust: http://www.deeds.com/forms/california/long-form-deed-of-trust/

California Short Form Deed of Trust: http://www.deeds.com/forms/california/short-form-deed-of-trust/

California Deed of Full Reconveyance: http://www.deeds.com/forms/california/deed-of-full-reconveyance/

California Substitution of Trustee and Full Reconveyance Forms: http://www.deeds.com/forms/california/substitution-of-trustee-and-full-reconveyance/

California Short Form Deed of Trust with Assignments of Rents Forms: http://www.deeds.com/forms/california/short-form-deed-of-trust-with-assignments-of-rents/

California Correction Deed: http://www.deeds.com/forms/california/correction-deed/