CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN GRANDPARENT AND GRANDCHILD OCCURRING ON OR AFTER FEBRUARY 16, 2021

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

Lassen County Assessor 107 S. Roop St Susanville CA 96130 (530) 251-2680 amurchison@co.lassen.ca.us

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A. P	ROPERTY						
ASSES	SSOR'S PARCEL/ID NUMBER						
DD0D	FDT// ADDDE00	CITY					
PROPI	ERTY ADDRESS						
DATE (OF PURCHASE OR TRANSFER	RECORDER'S DOCUMENT NUMBER					
DATE (OF DEATH (if applicable)	PROBATE NUMBER (if applicable)	DATE OF DECREE OF DISTRIBUTION (if applicable)				
R TI	RANSEEROR(S)/SELLER(S) (additional tra	nsferors, please complete Section D on the re	(Merse)				
	full name(s) of transferor(s)	Name	Name				
	()						
Family relationship(s) to transferee(s)		Relationship	Relationship				
 1.	Was this property the transferor's family fa	arm?					
Was this property the transferor's principal residence? ☐ Yes ☐ No							
	to be granted on this property:						
☐ Homeowners' Exemption ☐ Disabled Veterans' Exemption							
3.	3. Was only a partial interest in the property transferred? ☐ Yes ☐ No If yes, percentage transferred%.						
4.	4. Was this property owned in joint tenancy? ☐ Yes ☐ No						
5.	5. Print name(s) of child(ren) of grandparents who is(are) the parent(s) of grandchild:						
		ne medium of a will and/or trust, you must	attach a full and complete copy of the will				
а	nd/or trust and all amendments.						
		CERTIFICATION					
any a		true and correct to the best of my knowledge	foregoing and all information hereon, including and that I am the grandparent or grandchild (or				
SIGNA	TURE OF TRANSFEROR OR LEGAL REPRESENTA	DATE					
SIGNA	TURE OF TRANSFEROR OR LEGAL REPRESENTA	TIVE PRINTED NAME	DATE				
MAILIN	IG ADDRESS	ı	DAYTIME PHONE NUMBER ()				
CITY, S	STATE, ZIP	EMAIL ADDRESS					

(Please complete information on reverse side)

C.	TRANSFEREE(S)/BUYER(S) (additional	al transferees please con	nplete Section E below)					
		Name		Name				
Family relationship(s) to transferor(s)		Relationship		Relation	ship			
1.	If grandchild was adopted, age at time of	adoption: A	adopted by whom?					
2.	2. Parent: Name of direct descendant of grandparent who is the parent of the grandchild:							
	Date of death of direct descendant(please provide death certificate)							
	a. Was deceased parent married or in a registered domestic partnership ("registered" means registered with the California Secretary of State) as of the date of death? Yes No							
	 b. Is the spouse or registered domestic partner of the deceased parent a: (check one): Parent of the grandchild Stepparent of the grandchild (a stepparent need not be deceased) 							
3. 4.	If YES , date of marriage or regist qualify for exclusion. Date of marr If NO , surviving spouse/partner is to qualify for exclusion. Date of de Is this property continuing to be used as Is this propery going to be the transferee	Had surviving spouse/partner remarried or entered into a registered domestic partnership? Yes No If YES, date of marriage or registration of the domestic partnership must have occurred prior to the date of purchase or transfer to qualify for exclusion. Date of marriage/domestic partnership registration: If NO, surviving spouse/partner is still considered a child of grandparents and must also be deceased prior to the purchase or transfer to qualify for exclusion. Date of death (Please provide death certificate) this property continuing to be used as the family farm by the transferee? Yes No this propery going to be the transferee's principal residence? Yes No yes, please check which of the following exemptions for which a claim was filed and complete a, b, and c below. (Please note that the						
	transferee must file for one of these exer	• ,		complete a, b,	and c below. (Flease note that the			
	☐ Homeowners' Exemption ☐ Disabled Veterans' Exemption ☐ Date Filed							
	a. Name of transferee who filed exemption claim: b. Date the transferee occupied this properry as a principal residence:(month/day/year) c. Does the transferee own another property that is or was their principal residence in California?							
AD	DRESS	COUNTY	COUNTY		ASSESSOR'S PARCEL/ID NUMBER			
CIT	Y, STATE, ZIP			MC	OVE-OUT-DATE (month/date/year)			
		CERTIF	FICATION	· · · · · · · · · · · · · · · · · · ·				
an	ertify (or declare) under penalty of perjury y accompanying statements or documents nsferee's legal representative) of the transf	, is true and correct to th						
SIGNATURE OF TRANSFEREE OR LEGAL REPRESENTATIVE		ENTATIVE	PRINTED NAME		DATE			
SIGNATURE OF TRANSFEREE OR LEGAL REPRESENTATIVE		ENTATIVE	PRINTED NAME		DATE			
MAILING ADDRESS CITY, STATE, ZIP					DAYTIME PHONE NUMBER () EMAIL ADDRESS			
	ote: The Assessor may contact you for add	litional information.						
_								
_	ADDITIONAL TRANSFEROR(S)/SELLER	R(S)		DI	TI ATIONSHIP TO TRANSFERE			
I NIXT NAME				Ri	ELATIONSHIP TO TRANSFEREE			
	ADDITIONAL TRANSFEREE(S)/BUYER(S	(3)						
PRINT NAME					ELATIONSHIP TO TRANSFEROR			
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CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN GRANDPARENT AND GRANDCHILD OCCURRING ON OR AFTER FEBRUARY 16, 2021

For transfers occurring on or after February 16, 2021, section 2.1(c) of article XIII A of the California Constitution provides that the terms "purchase" or "change in ownership" do not include the purchase or transfer of a family home between grandparents and their grandchildren, as long as the property was the family home of the transferor and continues as the family home of the transferee. A family home also includes a family farm.

To qualify for this exclusion, all parents of the grandchild, who qualify as children of the grandparents, must be deceased as of the date of the grandparent-grandchild transfer. A stepparent does not need to be deceased.

For a family home, the transferee is required to file for the homeowners' or disabled veterans' exemption within one year of the date of transfer.

If the assessed value of the family home on the date of transfer *exceeds* the sum of the factored base year value plus \$1 million, the amount in excess of this sum will be added to the factored base year value.

This claim form is for transfers occurring on or after February 16, 2021.

For transfers occurring on or before February 15, 2021, please file claim form BOE-58-G, Claim for Reassessment Exclusion for Transfer from Grandparent to Grandchild.

NOTE: A county board of supervisors may authorize 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 grandparent-grandchild change in ownership exclusion after two written requests have been sent to an eligible transferee by the county assessor.