

**CHANGE OF OWNERSHIP STATEMENT
REAL PROPERTY OR MANUFACTURED HOMES
SUBJECT TO LOCAL PROPERTY TAXES**



RECORDING DATA	
Date _____	
Document Number _____	
Book _____	Page _____

GRANT W. METZGER, JR., ASSESSOR
CALAVERAS COUNTY GOVERNMENT CENTER
891 Mountain Ranch Rd., San Andreas, CA 95249
(209) 754-6356 Fax (209) 754-6739

File This Statement By _____

Assessor's Parcel Number _____

Property Address _____

Legal Description _____

Correct mailing address if necessary.

Name and Address of Buyer/Transferee [last name, first name(s), initial]

Seller/Transferor _____
[last name, first name(s) initial]

IMPORTANT NOTICE

The law requires any transferee acquiring an interest in real property or manufactured home subject to local property taxation, and that is assessed by the Assessor, to file a Change of Ownership Statement with the County Recorder or Assessor. The Change of Ownership Statement must be filed at the time of recording or, if the transfer is not recorded, within 45 days of the date of the change in ownership, except that where the change in ownership has occurred by reason of death the statement shall be filed within 150 days after the date of death or, if the estate is probated, shall be filed at the time the inventory and appraisal is filed. The failure to file a change in ownership statement within 45 days from the date of a written request by the Assessor results in a penalty of either: (1) One hundred dollars (\$100), or (2) 10 percent of the taxes applicable to the new base year value reflecting the change in ownership of the real property or manufactured home, whichever is greater, but not to exceed two thousand five hundred dollars (\$2,500) if that failure to file was not willful. This penalty will be added to the assessment roll and shall be collected like any other delinquent property taxes, and be subject to the same penalties for nonpayment.

This notice is a written request from the Office of the Assessor for a Change of Ownership Statement. If you do not file this statement, it will result in the assessment of a penalty. This statement will be held secret as required by section 481 of the Revenue and Taxation Code.

The property which you acquired may be subject to a supplemental assessment in an amount to be determined by the _____ Assessor. For further information on your supplemental roll obligation, please call the _____ Assessor at _____.

PART I: TRANSFER INFORMATION (Please answer all questions.)

- | YES | NO | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | A. Is this transfer solely between husband and wife (addition of a spouse, death of a spouse, divorce settlement, etc.)? |
| <input type="checkbox"/> | <input type="checkbox"/> | B. Is this transaction only a correction of the name(s) of the person(s) holding title to the property (e.g., a name change upon marriage)? |
| <input type="checkbox"/> | <input type="checkbox"/> | C. Is this document recorded to create, terminate, or reconvey a lender's interest in the property? |
| <input type="checkbox"/> | <input type="checkbox"/> | D. Is this transaction recorded only as a requirement for financing purposes or to create, terminate, or reconvey a security interest (e.g., cosigner)? |
| <input type="checkbox"/> | <input type="checkbox"/> | E. Is this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar document? |
| <input type="checkbox"/> | <input type="checkbox"/> | F. Did this transfer result in the creation of a joint tenancy in which the seller (transferor) remains as one of the joint tenants? |
| <input type="checkbox"/> | <input type="checkbox"/> | G. Does this transfer return property to the person who created the joint tenancy (original transferor)? |
| <input type="checkbox"/> | <input type="checkbox"/> | H. Is this transfer of property: |
| <input type="checkbox"/> | <input type="checkbox"/> | 1. to a trust for the benefit of the <input type="checkbox"/> Grantor <input type="checkbox"/> Grantor's spouse? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. to a trust revocable by the transferor? |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. to a trust from which the property reverts to the grantor within 12 years? |
| <input type="checkbox"/> | <input type="checkbox"/> | I. If this property is subject to a lease, is the remaining lease term 35 years or more including written options? |
| <input type="checkbox"/> | <input type="checkbox"/> | *J. Is this a transfer between parent(s) and child(ren)? <input type="checkbox"/> Yes <input type="checkbox"/> No or from grandparent(s) to grandchild(ren)? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> | <input type="checkbox"/> | *K. Is this transaction to replace a principal residence by a person 55 years of age or older? Within the same county?
<input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> | <input type="checkbox"/> | *L. Is this transaction to replace a principal residence by a person who is severely disabled as defined by Revenue and Taxation Code section 69.5? Within the same county? <input type="checkbox"/> Yes <input type="checkbox"/> No |

* If you answered **yes** to J, K or L, you may qualify for a property tax reassessment exclusion, which may result in lower taxes on your property. If you do not file a claim, it will result in the reassessment of the property.

Please provide any other information that will help the Assessor to understand the nature of the transfer.

IF YOU HAVE ANSWERED **YES** TO ANY OF THE ABOVE QUESTIONS **EXCEPT J, K OR L**, PLEASE SIGN AND DATE, OTHERWISE COMPLETE THE REVERSE SIDE.

PART II: OTHER TRANSFER INFORMATION

- A. Date of transfer if other than recording date
B. Type of transfer. (Please check appropriate box.)
Purchase, Foreclosure, Gift, Trade or exchange, Merger, stock, or partnership acquisition, Sale/Leaseback, Other: Please explain, Termination of a lease. Date lease began
C. Was only a partial interest in the property transferred? Yes No If yes, indicate the percentage transferred %.

PART III: PURCHASE PRICE AND TERMS OF SALE

- A. CASH DOWN PAYMENT OR VALUE OF TRADE OR EXCHANGE (excluding closing costs) Amount \$
B. FIRST DEED OF TRUST @ % interest for years. Pymts./Mo. = \$ (Prin. & Int. only) Amount \$
C. SECOND DEED OF TRUST @ % interest for years. Pymts./Mo. = \$ (Prin. & Int. only) Amount \$
D. OTHER FINANCING: Is other financing involved not covered in (b) or (c) above? Yes No Amount \$
E. WAS AN IMPROVEMENT BOND ASSUMED BY THE BUYER? Yes No Outstanding balance: Amount \$
F. TOTAL PURCHASE PRICE (or acquisition price, if traded or exchanged, include real estate commission if paid) Total Items A through E \$
G. PROPERTY PURCHASED: Through a broker, Direct from seller, From a family member, Other (explain)
If purchased through a broker, provide broker's name and phone number:
Please explain any special terms, seller concessions, or financing and any other information that would help the Assessor understand the purchase price and terms of sale:

PART IV: PROPERTY INFORMATION

- A. TYPE OF PROPERTY TRANSFERRED: Single-family residence, Multiple-family residence (no. of units:), Commercial/Industrial, Other (Description: i.e., timber, mineral, water rights, etc.), Agricultural, Co-op/Own-your-own, Condominium, Timeshare, Manufactured home, Unimproved lot
B. IS THIS PROPERTY INTENDED AS YOUR PRINCIPAL RESIDENCE? Yes No
If yes, enter date of occupancy (month) / (day), 20 or intended occupancy (month) / (day), 20
C. IS PERSONAL PROPERTY INCLUDED IN PURCHASE PRICE (e.g., furniture, farm equipment, machinery, etc.)? (Other than a manufactured home subject to local property tax?) Yes No
If yes, enter the value of the personal property included in the purchase price \$ (Attach itemized list of personal property.)
D. IS A MANUFACTURED HOME INCLUDED IN THE PURCHASE PRICE Yes No
If yes, how much of the purchase price is allocated to the manufactured home? \$
Is the manufactured home subject to local property tax? Yes No What is the decal number?
E. DOES THE PROPERTY PRODUCE INCOME? Yes No If yes, is the income from: Lease/Rent, Contract, Mineral rights, Other - Explain:
F. WHAT WAS THE CONDITION OF THE PROPERTY AT THE TIME OF SALE? Good, Average, Fair, Poor
Please explain the physical condition of the property and provide any other information (such as restrictions, etc.) that would assist the Assessor in determining the value of the property:

CERTIFICATION

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, correct, and complete to the best of my knowledge and belief. This declaration is binding on each and every co-owner and/or partner.

Signed in County of , California, this day of 20

Table with 3 columns: SIGNATURE OF OWNER OR CORPORATE OFFICER, TITLE (if corporate officer/partner), PHONE NUMBER (8 a.m. - 5 p.m.)