EF-58-H-R02-0520-53000013-1 BOE-58-H REV 02 (05/20)

AFFIDAVIT OF COTENANT RESIDENCY



Shanna White County Clerk-Recorder-Assessor

P.O. Box 1255 Weaverville, CA 96093 Phone: (530) 623-1257 Fax: (530) 623-8398 assessor@trinitycounty.org

DATE

TELEPHONE NUMBER

NAME AND MAILING ADDRESS		
(Make necessary corrections to the printed name and mailing address) ——————————————————————————————————		
	Under the provisions of 62.3, if certain condition interest in real property cotenant that takes effernot a change in owners occur on or after Janua	f Revenue and Taxation Code section ns are met, a transfer of a cotenancy from one cotenant to the other ect upon the death of one cotenant is hip. This applies to transfers that rry 1, 2013.
The change in ownership exclusion for a transfer of an interest in real property be applies as long as all of the following are met:	ween cotenants that takes o	effect upon the death of one cotenant
 The transfer is solely by and between two individuals who together own 100 As a result of the death of the transferor cotenant, the deceased cotenant's in resulting in the surviving cotenant owning 100 percent of the real property, an For the one-year period immediately preceding the death of the transferor contribution. The real property was the principal residence of both cotenants immediately. For the one-year period immediately preceding the death of the transferor contribution. The surviving cotenant must sign, under penalty of perjury, an affidavit affirm deceased cotenant for the one-year period immediately preceding the date of the contribution. 	nterest in the real property is did thereby terminating the co- tenant, both of the cotenant preceding the transferor cot- tenant, both of the cotenant ing that they continuously re	s transferred to the surviving cotenant, otenancy. s were owners of record. enant's death. s continuously resided in the real property.
NAME OF SURVIVING COTENANT		
NAME OF DECEASED COTENANT		DATE OF DEATH
STREET ADDRESS OF REAL PROPERTY		ASSESSOR'S PARCEL NUMBER (APN)
CITY, STATE, ZIP CODE		<u> </u>
Property was eligible for: Homeowners' Exemption Disabled Veter Disposition of real property:	ans' Exemption	
Affidavit of death of joint tenant		
Decree of distribution pursuant to will or intestate succession		
Action of trustee pursuant to terms of trust (Attach a complete copy of trust and all amendments)		
1. Was this real property the principal residence of the deceased cotenant for the one-year period immediately preceding the date of death? — Yes — No		
2. Was this real property the principal residence of the surviving cotenant for the one-year period immediately preceding the date of death? 🔲 Yes 🔲 No		
3. Are there any other beneficiaries of the real property?		
If yes, please list other beneficiaries:		
CERTIFICATION OF COTENANT		

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

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 and correct to the best of my knowledge and that I continuously resided with the decedent in



this real property for the one-year period immediately preceding the decedent's date of death.

SIGNATURE OF SURVIVING COTENANT

EMAIL ADDRESS