EF-58-H-R02-0520-57000012-1 BOE-58-H REV 02 (05/20)

AFFIDAVIT OF COTENANT RESIDENCY



YOLO COUNTY COUNTY ASSESSOR

DATE

TELEPHONE NUMBER

625 Court St, Rm. 104 Woodland, CA 95695 Woodland/Davis (530) 666-8135 Fax (530) 666-8213 West Sacramento (916) 375-6496 www.yolocounty.org

NAME OF SURVIVING COTENANT	
NAME OF DECEASED COTENANT DA	ATE OF DEATH
STREET ADDRESS OF REAL PROPERTY AS	SSESSOR'S PARCEL NUMBER (APN)
CITY, STATE, ZIP CODE	
Property was eligible for: Homeowners' Exemption Disabled Veterans' Exemption	
Disposition of real property:	
☐ 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 pre	ceding the date of death? Yes No
2. Was this real property the principal residence of the surviving cotenant for the one-year period immediately prec	eding the date of death?
3. Are there any other beneficiaries of the real property?	
If yes, please list other beneficiaries:	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



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

SIGNATURE OF SURVIVING COTENANT

EMAIL ADDRESS