

FOR RECORDERS USE ONLY

PRELIMINARY CHANGE OF OWNERSHIP REPORT

To be completed by the transferee (buyer) prior to a transfer of subject property, in accordance with section 480.3 of the Revenue and Taxation Code. A *Preliminary Change of Ownership Report* must be filed with each conveyance in the County Recorder's office for the county where the property is located.

NAME AND MAILING ADDRESS OF BUYER/TRANSFEREE
(Make necessary corrections to the printed name and mailing address)

ASSESSOR'S PARCEL NUMBER _____

SELLER/TRANSFEROR _____

BUYER'S DAYTIME TELEPHONE NUMBER
 () _____

BUYER'S EMAIL ADDRESS _____

STREET ADDRESS OR PHYSICAL LOCATION OF REAL PROPERTY _____

MAIL PROPERTY TAX INFORMATION TO (NAME) _____

ADDRESS	CITY	STATE	ZIP CODE
<input type="checkbox"/> YES <input type="checkbox"/> NO This property is intended as my principal residence. If YES, please indicate the date of occupancy or intended occupancy.	MO	DAY	YEAR

PART 1. TRANSFER INFORMATION *Please complete all statements.*

This section contains possible exclusions from reassessment for certain types of transfers.

- | | | |
|--------------------------|--------------------------|---|
| YES | NO | |
| <input type="checkbox"/> | <input type="checkbox"/> | A. This transfer is solely between spouses <i>(addition or removal of a spouse, death of a spouse, divorce settlement, etc.)</i> . |
| <input type="checkbox"/> | <input type="checkbox"/> | B. This transfer is solely between domestic partners currently registered with the California Secretary of State <i>(addition or removal of a partner, death of a partner, termination settlement, etc.)</i> . |
| <input type="checkbox"/> | <input type="checkbox"/> | *C. This is a transfer: <input type="checkbox"/> between parent(s) and child(ren) <input type="checkbox"/> from grandparent(s) and grandchild(ren). |
| <input type="checkbox"/> | <input type="checkbox"/> | *D. This transfer is the result of a cotenant's death. Date of death _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | *E. This transaction is 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"/> | *F. This transaction is 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 |
| <input type="checkbox"/> | <input type="checkbox"/> | G. This transaction is only a correction of the name(s) of the person(s) holding title to the property <i>(e.g., a name change upon marriage)</i> . If YES, please explain: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | H. The recorded document creates, terminates, or reconveys a lender's interest in the property. |
| <input type="checkbox"/> | <input type="checkbox"/> | I. This transaction is recorded only as a requirement for financing purposes or to create, terminate, or reconvey a security interest <i>(e.g., cosigner)</i> . If YES, please explain: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | J. The recorded document substitutes a trustee of a trust, mortgage, or other similar document. |
| <input type="checkbox"/> | <input type="checkbox"/> | K. This is a transfer of property: |
| <input type="checkbox"/> | <input type="checkbox"/> | 1. to/from a revocable trust that may be revoked by the transferor and is for the benefit of <input type="checkbox"/> the transferor, and/or <input type="checkbox"/> the transferor's spouse <input type="checkbox"/> registered domestic partner. |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. to/from a trust that may be revoked by the creator/grantor/trustor who is also a joint tenant, and which names the other joint tenant(s) as beneficiaries when the creator/grantor/trustor dies. |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. to/from an irrevocable trust for the benefit of the <input type="checkbox"/> creator/grantor/trustor and/or <input type="checkbox"/> grantor's/trustor's spouse <input type="checkbox"/> grantor's/trustor's registered domestic partner. |
| <input type="checkbox"/> | <input type="checkbox"/> | L. This property is subject to a lease with a remaining lease term of 35 years or more including written options. |
| <input type="checkbox"/> | <input type="checkbox"/> | M. This is a transfer between parties in which proportional interests of the transferor(s) and transferee(s) in each and every parcel being transferred remain exactly the same after the transfer. |
| <input type="checkbox"/> | <input type="checkbox"/> | N. This is a transfer subject to subsidized low-income housing requirements with governmentally imposed restrictions. |
| <input type="checkbox"/> | <input type="checkbox"/> | *O. This transfer is to the first purchaser of a new building containing an active solar energy system. |

* Please refer to the instructions for Part 1.

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

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

PART 2. OTHER TRANSFER INFORMATION

Check and complete as applicable.

- A. Date of transfer, if other than recording date: _____
- B. Type of transfer:
 Purchase Foreclosure Gift Trade or exchange Merger, stock, or partnership acquisition (Form BOE-100-B)
 Contract of sale. Date of contract: _____ Inheritance. Date of death: _____
 Sale/leaseback Creation of a lease Assignment of a lease Termination of a lease. Date lease began: _____
 Original term in years (including written options): _____ Remaining term in years (including written options): _____
 Other. Please explain: _____
- C. Only a partial interest in the property was transferred. YES NO If YES, indicate the percentage transferred: _____ %

PART 3. PURCHASE PRICE AND TERMS OF SALE

Check and complete as applicable.

- A. Total purchase price \$ _____
- B. Cash down payment or value of trade or exchange excluding closing costs Amount \$ _____
- C. First deed of trust @ _____ % interest for _____ years. Monthly payment \$ _____ Amount \$ _____
 FHA (____ Discount Points) Cal-Vet VA (____ Discount Points) Fixed rate Variable rate
 Bank/Savings & Loan/Credit Union Loan carried by seller
 Balloon payment \$ _____ Due date: _____
- D. Second deed of trust @ _____ % interest for _____ years. Monthly payment \$ _____ Amount \$ _____
 Fixed rate Variable rate Bank/Savings & Loan/Credit Union Loan carried by seller
 Balloon payment \$ _____ Due date: _____
- E. Was an Improvement Bond or other public financing assumed by the buyer? YES NO Outstanding balance \$ _____
- F. Amount, if any, of real estate commission fees paid by the buyer which are not included in the purchase price \$ _____
- G. The property was purchased: Through real estate broker. Broker name: _____ Phone number: _____
 Direct from seller From a family member-Relationship _____
 Other. Please explain: _____
- H. Please explain any special terms, seller concessions, broker/agent fees waived, financing, and any other information (e.g., buyer assumed the existing loan balance) that would assist the Assessor in the valuation of your property.

PART 4: PROPERTY INFORMATION

Check and complete as applicable.

- A. Type of property transferred
 Single-family residence Co-op/Own-your-own Manufactured home
 Multiple-family residence. Number of units: _____ Condominium Unimproved lot
 Other. Description: (i.e., timber, mineral, water rights, etc.) Timeshare Commercial/Industrial
- B. YES NO Personal/business property, or incentives, provided by seller to buyer are included in the purchase price. Examples of personal property are furniture, farm equipment, machinery, etc. Examples of incentives are club memberships, etc. Attach list if available.
 If YES, enter the value of the personal/business property: \$ _____ Incentives \$ _____
- C. YES NO A manufactured home is included in the purchase price.
 If YES, enter the value attributed to the manufactured home: \$ _____
 YES NO The manufactured home is subject to local property tax. If NO, enter decal number: _____
- D. YES NO The property produces rental or other income.
 If YES, the income is from: Lease/rent Contract Mineral rights Other: _____
- E. The condition of the property at the time of sale was: Good Average Fair Poor
 Please describe: _____

CERTIFICATION

I certify (or declare) that the foregoing and all information hereon, including any accompanying statements or documents, is true and correct to the best of my knowledge and belief.

SIGNATURE OF BUYER/TRANSFeree OR CORPORATE OFFICER	DATE	TELEPHONE ()
NAME OF BUYER/TRANSFeree/LEGAL REPRESENTATIVE/CORPORATE OFFICER (PLEASE PRINT)	TITLE	E-MAIL ADDRESS

The Assessor's office may contact you for additional information regarding this transaction.