YES NO complete the certification on page 2. TREET ADDRESS OF REAL PROPERTY CITY DESCRIPTIVE INFORMATION If APN UNKNOWN DISPO Copy of deed by which decedent acquired title is attached. Su Copy of decedent's most recent tax bill is attached. Pro Deed or tax bill is not available; legal description is attached. Aff TRANSFER INFORMATION Image: Check all that apply and list details be Decedent's spouse Decedent's registered dor Decedent's spouse Decedent's registered dor Decedent's grandchild(ren.) If qualified for exclusion from assessment <i>Grandparent to Grandchild</i> must be filed (see instructions). Other beneficiaries or heirs. A trust. At rust. Address of trustee	Section 480(b) of the Revenue and Taxation Code requires the personal representative file this statement with the Asse in each county where the decedent owned property at the tim death. File a separate statement for each parcel of real prop owned by the decedent.
his notice is a request for a completed Change in Denership Statement. Failure to file this statement will esult in the assessment of a penalty. NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)	Fax: (831) 755-5435 assessor@co.monterey.ca.us Section 480(b) of the Revenue and Taxation Code requires the personal representative file this statement with the Asse in each county where the decedent owned property at the tir death. File a separate statement for each parcel of real prop owned by the decedent. DATE OF DEATH In this county? If YES, answer all questions. If NO, sign and 2 ^{IIP} CODE ASSESSOR'S PARCEL NUMBER (APN)* *If more than 1 parcel, attach separate s SITION OF REAL PROPERTY Image: Site Code 13650 distribution idavit of death of joint tenant Pow. Nestic partner
Dwnership Statement. Failure to file this statement will esult in the assessment of a penalty. NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)	Section 480(b) of the Revenue and Taxation Code requires the personal representative file this statement with the Assi in each county where the decedent owned property at the tir death. File a separate statement for each parcel of real pro- owned by the decedent.
(Make necessary corrections to the printed name and mailing address) Image:	Section 480(b) of the Revenue and Taxation Code requires the personal representative file this statement with the Asso in each county where the decedent owned property at the tir death. File a separate statement for each parcel of real pro- owned by the decedent.
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Cotenant to cotenant. If qualified for exclusion from assessment, an instructions). Other beneficiaries or heirs. A trust. AME OF TRUSTEE ADDRESS OF TRUSTEE	nt, a Claim for Reassessment Exclusion for Transfer from
A trust. AME OF TRUSTEE ADDRESS OF TRUSTEE	Affidavit of Cotenant Residency must be filed (see
AME OF TRUSTEE ADDRESS OF TRUSTEE	
List names and percentage of ownership of all beneficiaries or heir	s:
NAME OF BENEFICIARY OR HEIRS RELATIONSHIP TO I	DECEDENT PERCENT OF OWNERSHIP RECEIVED
This property has been or will be sold prior to distribution. (Attach the	

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



EF-502-D-R10-0617-27000234-2 BOE-502-D (P2) REV. 10 (06-17)

YES NO Will the decree of distribution include distribution of an ownership interest in any legal entity that owns real property in this county? If **YES**, will the distribution result in any person or legal entity obtaining control of more than 50% of the ownership of that legal entity? YES NO If **YES**, complete the following section.

NAME AND ADDRESS OF LEGAL ENTITY		NAME OF PERSON OR ENTITY	GAINING SUC	CH CONTROL
	edent the lessor or lessee in a lease that ES, provide the names and addresses of a		more, incl	uding renewal
NAME	MAILING ADDRESS	CITY	STATE	ZIP CODE
NAME	IAILING ADDRESS FOR FUTURE PROP			
			Λ	
ADDRESS	СІТҮ	STAT	E ZIP CODI	=
	CERTIFICATION			
l certify (or declare) u <mark>nd</mark> er pen	alty of perju <mark>ry</mark> under the laws of the State of		taine <mark>d</mark> hei	rein is true,
SIGNATURE OF SPOUSE/REGISTERED DOMES	correct and complete to the best of my TIC PARTNER/PERSONAL REPRESENTATIVE	PRINTED NAME		
TITLE		DATE		
EMAIL ADDRESS		DAYTIME TELE	PHONE	
		()		
	INSTRUCTIONS			
	to file a Change in Ownership Statement 5100 or 10% of the taxes applicable to the			
	whichever is greater, but not to exceed five			
nomeo	wners' exemption or twenty thousand dollar			
	tion if that failure to file was not willful. Thi ed like any other delinquent property taxes			
Section 480 of the Revenue and Taxat		and subjected to the same penaltie		ayment.
(a) Whenever there occurs any change by the county assessor, the transfer located, as provided for in subdivisi	e in ownership of real property or of a manufactu ee shall file a signed change in ownership states on (c). In the case of a change in ownership wh	ment in the county where the real proper	y or manuf	actured home is
statement is required.				
	file a change in ownership statement with the o death that is subject to probate proceedings. T			
appraisal is filed with the court clerk	. In all other cases in which an interest in real pro	o <mark>pe</mark> rty is transferre <mark>d</mark> by reason of death, i	including a	transfer through
, 0	n ownership statement or statements shall be fil or in each county in which the decedent owned a		,	
	quired by law. Please reference the following:		,	
Passage of Decedent's Property:	Beneficial interest passes to the decedent's heir he heirs. An attorney should be consulted to disc	5	eath. Howe	ver, a document
Change in Ownership: California shall be "the date of death of deci	Code of Regulations, Title 18, Rule 462.260(c),	states in part that "[i]nheritance (by will o	or intestate	succession)"
the personal representative shall	Code, Section 8800, states in part, "Concurrent also file a certification that the requirements of S e decedent owned no real property in California	Section 480 of the Revenue and Taxation		
(2) Have been satisfied by the filin the decedent owned property	ng of a change in ownership statement with the at the time of death."	county recorder or assessor of each cou	inty in Calif	ornia in which
of transfer to a third party; or with property for which the claim is file	andchild Exclusions: A claim must be filed with in six months after the date of mailing of a Noti d. An application may be obtained by ccontactir	ice of Assessed Value Change, issued and the county assessor.	as a result	of the transfer of
	must be filed with the county assessor. An affid			
This statement will remain co	nfidential as required by Revenue ar	ig laxation Lode Section 481.	which st	ales in Dart:

This statement will remain confidential as required by Revenue and Taxation Code Section 481, which states in part "These statements are not public documents and are not open to inspection, except as provided by Section 408."

