## EF-19-C-R01-0522-46000163-1

## BOE-19-C (P1) REV. 01 (05-22) CERTIFICATION OF VALUE BY ASSESSOR FOR BASE YEAR VALUE TRANSFER



Ms. Laura Marshall Sierra County Assessor 100 Courthouse SQ Downieville, CA 95936-8 Phone: (530) 289-3283

County Assessor

Address

City, State, Zip

Replacement Residence APN \_

Section 2.1(b) of article XIII A of the California Constitution, implemented by Revenue and Taxation Code section 69.6, allows a homeowner who is at least age 55 or severely and permanently disabled or a victim of a wildfire or natural disaster to transfer their base year value from an original primary residence to a replacement primary residence located anywhere in California. An application for a base year value transfer to a replacement primary residence located anywhere in California. Since the claim involves the transfer of a base year value from an original primary original primary residence located in \_\_\_\_\_\_ County, we are requesting the following information from your office.

Please complete Section B of this form and return it to our office at the address above.

A. ORIGINAL PRIMARY RESIDENCE (INFORM	IATION THAT W	AS PROVID	ED T	O THE ASSESS	OR BY TH	IE CLAIMANT)
Applicant Name:			plication Date:			
Situs Address of Property Sold:			ity:			
County:			ssessor's Parcel/ID Number.			
Sale Price:		Date	e of Sa	ale:		A
B. REQUESTED INFORMATION					_	
Confirmation of Sale Price:			onfirmation of Date of Sale:			
Recorder's Document Number: Date of Recording:						
Total Property FBYV (prior to sale): \$		Roll	Year (	year-yea <mark>r):</mark>		
Total Land FBYV: \$	d Base Year:	Total Impro	vemer	nt FBYV: \$		Imp Base Year:
Fair Market Value at Time of Sale:					Multi	ple Base Year (attach explanation)
\$ Total Land Value: \$				ovement Value: \$		
			· ·	· · ·		eidence:
Was entire property used as a primary residence? Yes No Property description, if other than primary residence:						
If no, FMV allocated to primary residence: Land \$	FMV		V	Improve \$	ement FMV	
Was the property eligible for exemption? Yes	No If no, the red	ceiving county r	nust re	equest proof of resider	ncy from the	e claimant.
Did the applicant's name appear as an assessee immediately prior to the above-referenced transfer? Ves No						
For this applicant, has your county previously granted a base year value transfer for age or disability pursuant to Section 2.1 article XIII A (Prop 19)?						
Yes No If yes, what is the date of exclusion?						
PRINCIPAL RESIDENCE SUBSTANTIALLY DAMAGE	D/DESTROYED BY	DISASTER FO	R WHI	CH THE GOVERNOR		D A STATE OF EMERGENCY
Was property substantially damaged or destroyed by a Governor-proclaimed disaster? Yes No						Was the property sold in its damaged state? Yes No
ir Market Value immediately prior to disaster: Factored Base Year Value (prior to dis \$			aster): Roll Year (year-year):			
			t Factored Base Year Value (prior to disaster): \$			
Was the property eligible for exemption?	No If no, the re	eceiving county	must r	request proof of reside	ency from th	e claimant.
Did the applicant's name appear as an assessee immediated				Yes No	)	
Name of Contact:			PROVIDED BY: Email Address:			
			Lman	Autress.		
County Assessor's Office:			Phone Number:			
CERTIFICATION OF VALUE REQUESTED BY:						
Name of Contact: Email Address:			Phone Number:			