EF-19-D-R02-0522-51000103-1

BOE-19-D (P1) REV. 02 (05-22)

CLAIM FOR TRANSFER OF BASE YEAR VALUE TO REPLACEMENT PRIMARY RESIDENCE FOR SEVERELY AND

Applies to base year value transfers occurring on or after April 1, 2021.

PERMANENTLY DISABLED PERSONS

Kathy Scriven **Sutter County Assessor** 1160 Civic Center Blvd., Suite D Yuba City, CA 95993 Phone Number: (530) 822-7160 Fax Number: (530) 822-7198 Email: assessor@co.sutter.ca.us

Include form BOE-19-DC, Certificate of Disability, when filing this form.

A. REPLACEMENT PRIMARY RESIDI	ENCE			
ASSESSOR'S PARCEL/ID NUMBER		RECORDER'S DOCUME	ENT NUMBER (if known)	
DATE OF PURCHASE		DATE OF COMPLETION	DATE OF COMPLETION OF NEW CONSTRUCTION (if applicable)	
PURCHASE PRICE		COST OF NEW CONSTR	PLICTION (if applicable)	
\$		\$	COCTION (II applicable)	
PROPERTY ADDRESS		CITY	COUNTY	
. Do you occupy the replacement prima	ary residence as your principa	al residence?	es 🗆 No	
2. Is this property a multi-unit property?				
			has already been granted the base year va	
ransfer within the past two years?		vas the date of your		
B. ORIGINAL PRIMARY RESIDENCE	(FORMER PROPERTY)			
SSESSOR'S PARCEL/ID NUMBER	,			
DATE OF SALE	/\	SALE PRICE		
PROPERTY ADDRESS		CITY	COUNTY	
Mag this property your principal recide	2022			
. Was this property your principal reside	ence? Yes No Dat	te property was no l	onger your principal residence:	
2. Was this property a multi-un <mark>it propert</mark> y	y? 🗌 Yes 🗍 No If yes, w	h <mark>ich</mark> unit was your p	rincipal residence?	
 Was this property a multi-unit property Did this property transfer to your grand 	y? Yes No If yes, w	h <mark>ich unit was your p</mark>) or grandchild(ren)?	rincipal residence? ?	
 Was this property a multi-unit property Did this property transfer to your grand Was there any new construction to this 	y? Yes No If yes, w	h <mark>ich unit was your p</mark>) or grandchild(ren)?	rincipal residence? ?	
2. Was this property a multi-unit property 3. Did this property transfer to your grand 4. Was there any new construction to this If yes, please explain:	y? Yes No If yes, we deparent(s), parent(s), child(rend) so property since the last tax bill	hich unit was your p) or grandchild(ren)? II(s) and before the d	rincipal residence??	
 2. Was this property a multi-unit property 3. Did this property transfer to your grand 4. Was there any new construction to this If yes, please explain: Note: If the property is located in a di 	y? Yes No If yes, we deparent(s), parent(s), child(rend) something property since the last tax bill ferent county than that of t	hich unit was your p o) or grandchild(ren)? II(s) and before the d the replacement pri	rincipal residence? Yes No date of sale? Yes No mary residence, you must attach a copy	
2. Was this property a multi-unit property 3. Did this property transfer to your grand 4. Was there any new construction to this f yes, please explain: Note: If the property is located in a di the original residence's latest property	y? Yes No If yes, water the last tax bit of the last tax bill and any supplementary tax bill	hich unit was your p o) or grandchild(ren)? II(s) and before the d the replacement pri	rincipal residence? Yes No date of sale? Yes No mary residence, you must attach a copy	
2. Was this property a multi-unit property 3. Did this property transfer to your grand 4. Was there any new construction to this 1f yes, please explain: Note: If the property is located in a dit the original residence's latest propert C. CLAIMANT INFORMATION (please	y? Yes No If yes, we deparent(s), parent(s), child(rents property since the last tax bit ferent county than that of the tax bill and any supplement e print)	hich unit was your poly or grandchild(ren)? II(s) and before the diche replacement printer tax bill(s) issue	rincipal residence? Yes No late of sale? Yes No mary residence, you must attach a copy ed before the date of sale.	
2. Was this property a multi-unit property 3. Did this property transfer to your grand 4. Was there any new construction to this f yes, please explain: Note: If the property is located in a di the original residence's latest property	y? Yes No If yes, we deparent(s), parent(s), child(rents property since the last tax bit ferent county than that of the tax bill and any supplement e print)	hich unit was your p o) or grandchild(ren)? II(s) and before the d the replacement pri	rincipal residence? Yes No late of sale? Yes No mary residence, you must attach a copy ed before the date of sale. SEVERELY AND PERMANENTLY DISABLED	
2. Was this property a multi-unit property 3. Did this property transfer to your grand 4. Was there any new construction to this 1f yes, please explain: Note: If the property is located in a dit the original residence's latest propert C. CLAIMANT INFORMATION (please	y? Yes No If yes, we deparent(s), parent(s), child(rents property since the last tax bit ferent county than that of the tax bill and any supplement e print)	hich unit was your poly or grandchild(ren)? II(s) and before the diche replacement printer tax bill(s) issue	rincipal residence? Yes No late of sale? Yes No mary residence, you must attach a copy ed before the date of sale.	
2. Was this property a multi-unit property 3. Did this property transfer to your grand 4. Was there any new construction to this 1 If yes, please explain: Note: If the property is located in a ditthe original residence's latest propert C. CLAIMANT INFORMATION (please) NAME OF CLAIMANT	y? Yes No If yes, we deparent(s), parent(s), child(ren s property since the last tax bill ferent county than that of the tax bill and any supplement e print) social security completes the security complete	hich unit was your poly or grandchild(ren)? Il(s) and before the diche replacement printal tax bill(s) issue	rincipal residence? Programmer Yes No Rate of sale? Yes No Rate of sale? Yes No Rate of sale? Yes No Rate of sale. Severely and permanently disabled No Retificate of Disability.	
2. Was this property a multi-unit property 3. Did this property transfer to your grand 4. Was there any new construction to this 1 If yes, please explain: Note: If the property is located in a di the original residence's latest propert C. CLAIMANT INFORMATION (please NAME OF CLAIMANT NOTE: Please have a physician of a Have you or your spouse previously be	y? Yes No If yes, we deparent(s), parent(s), child(ren s property since the last tax bill ferent county than that of the tax bill and any supplement e print) social security completes the security complete	hich unit was your poly or grandchild(ren)? Il(s) and before the diche replacement printal tax bill(s) issue	rincipal residence? Programmer Yes No Rate of sale? Yes No Rate of sale? Yes No Rate of sale? Yes No Rate of sale. Severely and permanently disabled No Retificate of Disability.	
2. Was this property a multi-unit property 3. Did this property transfer to your grand 4. Was there any new construction to this 1	py? Yes No If yes, with parent(s), parent(s), child(rents property since the last tax bill are tax bill and any supplement to the print) social section of the print of the p	hich unit was your p) or grandchild(ren)? II(s) and before the d the replacement pri ental tax bill(s) issue EURITY NUMBER ete BOE-19-DC, Ce disability under section	rincipal residence? Proposition of sale? No Idate of sale? Yes No Imary residence, you must attach a copy and before the date of sale. SEVERELY AND PERMANENTLY DISABLED No Partificate of Disability. In 2.1 of article XIII A (Proposition 19)?	
2. Was this property a multi-unit property 3. Did this property transfer to your grand 4. Was there any new construction to this 1 If yes, please explain: Note: If the property is located in a di the original residence's latest propert C. CLAIMANT INFORMATION (please NAME OF CLAIMANT NOTE: Please have a physician of a Have you or your spouse previously be	py? Yes No If yes, with parent(s), parent(s), child(rents property since the last tax bill are tax bill and any supplement to the print) social section of the print of the p	hich unit was your p) or grandchild(ren)? II(s) and before the d the replacement pri ental tax bill(s) issue EURITY NUMBER ete BOE-19-DC, Ce disability under section	rincipal residence? Proposition of the proposition (19)?	
2. Was this property a multi-unit property 3. Did this property transfer to your grand 4. Was there any new construction to this 1	py? Yes No If yes, with parent(s), parent(s), child(rents property since the last tax bill are tax bill and any supplement to the print) social section of the print of the p	thich unit was your party or grandchild(ren)? II(s) and before the decide replacement printertal tax bill(s) issue that tax bill(s) issue the BOE-19-DC, Cellisability under section ber(s) for which reliable.	rincipal residence? Proposition of sale? No Idate of sale? Yes No Imary residence, you must attach a copy and before the date of sale. SEVERELY AND PERMANENTLY DISABLED No Partificate of Disability. In 2.1 of article XIII A (Proposition 19)?	
2. Was this property a multi-unit property 3. Did this property transfer to your grand 4. Was there any new construction to this 1 If yes, please explain: Note: If the property is located in a dit the original residence's latest propert C. CLAIMANT INFORMATION (please NAME OF CLAIMANT NOTE: Please have a physician of a Have you or your spouse previously be 1 Yes No If yes, please provide the county(ies) a	dparent(s), parent(s), child(rents property since the last tax bild ferent county than that of the tax bill and any supplement specialty complete granted relief for age or deand Assessor's Parcel/ID Number 1997.	hich unit was your poly or grandchild(ren)? II(s) and before the delication of the replacement printal tax bill(s) issued to the second of the	rincipal residence? Yes No date of sale? Yes No mary residence, you must attach a copy ed before the date of sale. SEVERELY AND PERMANENTLY DISABLED No ertificate of Disability. on 2.1 of article XIII A (Proposition 19)? ief was granted.	
2. Was this property a multi-unit property 3. Did this property transfer to your grand 4. Was there any new construction to this 1 If yes, please explain: Note: If the property is located in a ditthe original residence's latest propert C. CLAIMANT INFORMATION (please NAME OF CLAIMANT NOTE: Please have a physician of a Have you or your spouse previously be 1 Yes No If yes, please provide the county(ies) a	dparent(s), parent(s), child(rents property since the last tax bild ferent county than that of the tax bill and any supplement e print) social sector of the sector of th	hich unit was your poly or grandchild(ren)? II(s) and before the delication of the replacement printal tax bill(s) issues EURITY NUMBER ete BOE-19-DC, Cellisability under section ber(s) for which relication cation of California that: (1)	rincipal residence? Yes No late of sale? Yes No mary residence, you must attach a copy ed before the date of sale. SEVERELY AND PERMANENTLY DISABLED No extificate of Disability. on 2.1 of article XIII A (Proposition 19)? ief was granted.	
2. Was this property a multi-unit property 3. Did this property transfer to your grand 4. Was there any new construction to this 1 If yes, please explain: Note: If the property is located in a ditthe original residence's latest propert C. CLAIMANT INFORMATION (please NAME OF CLAIMANT NOTE: Please have a physician of a Have you or your spouse previously be 1 Yes No If yes, please provide the county(ies) a	dparent(s), parent(s), child(rents property since the last tax bild ferent county than that of the tax bill and any supplement e print) social sector of the sector of th	hich unit was your poly or grandchild(ren)? II(s) and before the delication of the replacement printal tax bill(s) issues EURITY NUMBER ete BOE-19-DC, Cellisability under section ber(s) for which relication cation of California that: (1)	rincipal residence? Yes No date of sale? Yes No mary residence, you must attach a copy ed before the date of sale. SEVERELY AND PERMANENTLY DISABLED No extificate of Disability. on 2.1 of article XIII A (Proposition 19)? ief was granted. as a claimant/occupant I occupy the replacem	
2. Was this property a multi-unit property 3. Did this property transfer to your grand 4. Was there any new construction to this 1 If yes, please explain: Note: If the property is located in a ditthe original residence's latest propert C. CLAIMANT INFORMATION (please NAME OF CLAIMANT NOTE: Please have a physician of a Have you or your spouse previously be 1 Yes No If yes, please provide the county(ies) a I certify (or declare) under penalty of perjungrimary residence described above as my	dparent(s), parent(s), child(rents property since the last tax bild ferent county than that of the tax bill and any supplement e print) social sector of the sector of th	hich unit was your poly or grandchild(ren)? II(s) and before the delication of the replacement printal tax bill(s) issues EURITY NUMBER ete BOE-19-DC, Cellisability under section ber(s) for which relication cation of California that: (1)	rincipal residence? Proposition of sale? No Idate of sale? Yes No Imary residence, you must attach a copy ed before the date of sale. SEVERELY AND PERMANENTLY DISABLED No Partificate of Disability. In 2.1 of article XIII A (Proposition 19)?	
2. Was this property a multi-unit property 3. Did this property transfer to your grand 4. Was there any new construction to this 1 If yes, please explain: Note: If the property is located in a di the original residence's latest propert C. CLAIMANT INFORMATION (please NAME OF CLAIMANT NOTE: Please have a physician of a Have you or your spouse previously be Yes No If yes, please provide the county(ies) a I certify (or declare) under penalty of perju primary residence described above as my complete to the best of my knowledge and	property since the last tax bill ferent county than that of the tax bill and any supplement and any supplement specialty complete print) Social Section and Assessor's Parcel/ID Number of the state of	hich unit was your poly or grandchild(ren)? II(s) and before the delication of the replacement printal tax bill(s) issues EURITY NUMBER ete BOE-19-DC, Cellisability under section ber(s) for which relication cation of California that: (1)	rincipal residence? Pyes No Rate of sale? Yes No Rate of sale? Yes No Rate of sale? Yes No Rate of sale? No Retificate of Disability. Retificate of	

All information provided on this form is subject to verification.

IF YOUR APPLICATION IS INCOMPLETE, YOUR CLAIM MAY NOT BE PROCESSED.

THIS CLAIM IS CONFIDENTIAL AND NOT SUBJECT TO PUBLIC INSPECTION



GENERAL INFORMATION

Beginning April 1, 2021, section 2.1(b) of article XIII A of the California Constitution, implemented by Revenue and Taxation Code section 69.6, allows an owner of a primary residence who is severely and permanently disabled to transfer the factored base year value of their primary residence in California to a replacement primary residence that is located anywhere in California. To qualify for the base year value transfer, the following requirements must be met:

- · The original primary residence must be sold.
- The original primary residence must have been your principal place of residence (thus, eligible for the homeowners' or disabled veterans' exemption) either (1) at the time of sale, or (2) within two years of the purchase of your replacement primary residence.
- The replacement primary residence must be purchased or newly constructed within two years of the sale of the original primary residence.
- Claimant must own and occupy the replacement primary residence as a principal place of residence (thus, eligible for the homeowners' or disabled veterans' exemption) at the time this claim is filed.
- Either (1) the sale of the original primary residence, or (2) the purchase or completion of new construction of the replacement primary residence must occur on or after April 1, 2021

If the replacement primary residence is of equal or lesser value than the original primary residence, the factored base year value of the original primary residence becomes the base year value of the replacement primary residence. "Equal or lesser value" means the full cash value of the replacement primary residence does not exceed one of the following, which is based on the date of sale of the original primary residence and the date of purchase or completion of new construction of the replacement primary residence:

- 100 percent of the full cash value of the original primary residence if a replacement primary residence is purchased or newly constructed before the sale of the original primary residence.
- 105 percent of the full cash value of the original primary residence if a replacement primary residence is purchased or newly constructed within the first year after the sale of the original primary residence.
- 110 percent of the full cash value of the original primary residence if a replacement primary residence is purchased or newly constructed within the **second** year after the sale of the original primary residence.

If the full cash value of the replacement primary residence is of greater value than the adjusted full cash value of the original primary residence, partial relief is available. The difference between the adjusted full cash value of the original primary residence and the full cash value of the replacement primary residence will be added to the factored base year value that is transferred to the replacement primary residence.

Under Revenue and Taxation Code section 110(b), "full cash value" is presumed to be the purchase price, unless it is established by evidence that the real property would not have transferred for that purchase price in an open market transaction.

If the replacement primary residence is partly purchased and partly constructed, then the full cash value for both land and improvements is determined as either the date of purchase or the date of completion of new construction, which occurs last. A homeowner who is at least age 55 or severely disabled may transfer their base year value up to three times.

The disclosure of the social security number by the claimant of a replacement primary residence is mandatory. The number is used by the Assessor to verify the eligibility of the person claiming this exclusion and by the State of California to prevent more than three base year value transfers. This claim is confidential and not subject to public inspection.

A claim must be filed with the Assessor of the county in which the replacement property is located.

If you believe that you qualify for this exclusion, in addition to completing the reverse side of this form, you must also complete and submit form BOE-19-DC, Certificate of Disability. On the Certificate of Disability, you must provide either of the following:

- Certification, signed by a licensed physician or surgeon of appropriate specialty, stating the specific reasons that the disability necessitates the move to a replacement primary residence and that the replacement primary residence meets the disability-related requirements, including any locational requirements. In lieu of such a certification, if you or your spouse or guardian so declare under penalty of perjury, it shall be rebuttably presumed that the primary purpose of the move to the replacement primary residence is to satisfy identified disability-related requirements; or
- Evidence substantiating that the primary purpose of the move to the replacement primary residence is to alleviate financial burdens caused by the disability. Alternatively, if you or your spouse or guardian so declare under penalty of perjury, it shall be rebuttably presumed that the primary purpose of the move is to alleviate the financial burdens caused by the disability.



GENERAL INFORMATION

Revenue and Taxation Code section 74.3(b) defines a severely and permanently disabled person as "... any person who has a physical disability or impairment, whether from birth or by reason of accident or disease, that results in a functional limitation as to employment or substantially limits one or more major life activities of that person, and that has been diagnosed as permanently affecting the person's ability to function, including, but not limited to, any disability or impairment that affects sight, speech, hearing, or the use of any limbs."

If your claim is approved, the base year value will be transferred to the replacement primary residence as of the latest qualifying event — the sale of the original primary residence, the purchase of the replacement primary residence, or the completion of construction of the replacement primary residence. This means that if you purchase or construct your replacement primary residence first and sell your original primary residence second, you will be responsible for the increased taxes on your replacement primary residence until your original primary residence is sold.

If you are filing a claim for additional treatment as the result of new construction performed on a replacement primary residence that has already been granted the benefit, you must complete the first page of this form and include a description of the new construction in Section B.4, if applicable. You may be eligible if the new construction is completed within two years of the date of sale of the original primary residence; you have notified the Assessor in writing of the completion of new construction within 6 months after completion; and the fair market value of the new construction (as confirmed by the Assessor) on the date of completion, plus the full cash value of the replacement primary residence at the time of its purchase/date of completion of new construction (as confirmed by the Assessor) does not exceed the market value of the original property as of its date of sale.





EF-19-D-R02-0522-51000103