

FOR RECORDER'S USE ONLY

PRELIMINARY CHANGE IN 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 in Ownership Report must be filed with each conveyance in the County Recorder's office for the county where the property is located. Please answer all questions in each section, and sign and complete the certification before filing. This form may be used in all 58 California counties.

If a document evidencing a change in ownership is presented to the Recorder for recordation without the concurrent filing of a Preliminary Change in Ownership Report, the Recorder may charge an additional recording fee of twenty dollars (\$20).

NOTICE: A lien for property taxes applies to your property on January 1 of each year for the taxes owing in the following fiscal year, July 1 through June 30. One-half of these taxes is due November 1, and one-half is due February 1. The first installment becomes delinquent on December 10, and the second installment becomes delinquent on April 10. One tax bill is mailed before November 1 to the owner of record. You may be responsible for the current or upcoming property taxes even if you do not receive the tax bill.

The property which you acquired may be subject to a supplemental assessment in an amount to be determined by the County Assessor. Supplemental assessments are not paid by the title company at close of escrow, and are not included in lender impound accounts.

SELLER/TRANSFEROR

BUYER/TRANSFeree DAYTIME TELEPHONE NUMBER

STREET ADDRESS OR PHYSICAL LOCATION OF REAL PROPERTY ASSESSOR'S PARCEL NUMBER

MAIL PROPERTY TAX INFORMATION TO (NAME) ADDRESS CITY STATE ZIP CODE

PART 1. TRANSFER INFORMATION [X] Please complete all statements.

YES NO

- A. This transfer is solely between spouses (addition of a spouse, death of a spouse, divorce settlement, etc.).
B. This transfer is solely between domestic partners currently registered with the California Secretary of State.
C. This transaction is only a correction of the name(s) of the person(s) holding title to the property (e.g., a name change upon marriage). If YES, please explain:
D. This document is recorded to create, terminate, or reconvey a lender's interest in the property.
E. This transaction is recorded only as a requirement for financing purposes or to create, terminate, or reconvey a security interest (e.g., cosigner). If YES, please explain:
F. This document is recorded to substitute a trustee of a trust, mortgage, or other similar document.
G. This transfer resulted in the creation of a joint tenancy in which the seller (transferor) remains as one of the joint tenants.
H. This transfer returns property to the person who created the joint tenancy (original transferor).
I. This is a transfer of property:
1. to/from a revocable trust that may be revoked by the transferor and is for the benefit of the transferor, and or the transferor's spouse registered domestic partner.
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.
3. to/from an irrevocable trust for the benefit of the creator/grantor/trustor and/or grantor's/trustor's spouse.
4. to/from an irrevocable trust from which the property reverts to the creator/grantor/trustor within 12 years.
J. This property is subject to a lease with a remaining lease term of 35 years or more including written options.
K. This is a transfer between: parent(s) and child(ren) grandparent(s) and grandchild(ren).
L. This transaction is to replace a principal residence by a person 55 years of age or older.
M. 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.
N. This is a transfer between parties in which proportional interests of the transferor(s) and transferee(s) remain the same after the transfer.
O. This is a transfer subject to subsidized low-income housing requirements with governmentally imposed restrictions.
P. This transfer is to the first purchaser of a new building containing an active solar energy system.

If you checked YES to statements K, L, or M, you may qualify for a property tax reassessment exclusion, which may allow you to maintain the previous tax base. A claim form must be filed and all requirements met in order to obtain an exclusion. Contact the Assessor for claim forms. If you checked YES to statement P, you may qualify for a property tax new construction exclusion.

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

**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: \_\_\_\_\_ (attach a copy 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): \_\_\_\_\_  
If the lease plus options is 35 years or longer, attach a copy of the lease and all amendments.
- 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 or acquisition price. \$ \_\_\_\_\_

B. The property was purchased:  Through broker. Provide broker name and telephone: \_\_\_\_\_

Direct from seller  From a family member

Other. Please explain: \_\_\_\_\_

C. Please explain any special terms, seller concessions, financing, and any other information 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  Manufactured home
- Multiple-family residence. Number of units: \_\_\_\_\_  Condominium  Unimproved lot
- Other. Description: (i.e., timber, mineral, water rights, etc.)  Timeshare

B.  YES  NO This property is intended as my personal residence.

If YES, indicate the date of occupancy: \_\_\_\_\_ MM/DD/YYYY Or the date of intended occupancy: \_\_\_\_\_ MM/DD/YYYY

C.  YES  NO Personal/business property (other than a manufactured home subject to local property tax), or incentives, are included in the purchase price. Examples are furniture, farm equipment, machinery, club memberships, etc.

If YES, attach an itemized list and enter the value: \$ \_\_\_\_\_

D.  YES  NO A manufactured home is included in the purchase price.

If YES, enter the allocated value attributed to the manufactured home: \$ \_\_\_\_\_

YES  NO The manufactured home is subject to local property tax. If NO, enter decal number: \_\_\_\_\_

E.  YES  NO The property produces income.

If YES, the income is from:  Lease/rent  Contract  Mineral rights  Other: \_\_\_\_\_

F. The condition of the property at the time of sale was:  Good  Average  Fair  Poor

**CERTIFICATION**

I certify (or declare) under penalty of perjury under the laws of the State of California 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. **This declaration is binding on each and every co-owner and/or partner.**

SIGNATURE OF OWNER OR CORPORATE OFFICER	DATE
NAME OF NEW OWNER/LEGAL REPRESENTATIVE/CORPORATE OFFICER	TITLE
E-MAIL ADDRESS	DAYTIME TELEPHONE

**CHANGE IN OWNERSHIP STATEMENT  
COMMERCIAL/INDUSTRIAL PROPERTY  
SUBJECT TO LOCAL PROPERTY TAXES**

**This statement represents a written request from the Assessor. Failure to file will result in the assessment of a penalty.**

FILE THIS STATEMENT BY: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_ ASSESSOR'S PARCEL NUMBER: \_\_\_\_\_

**PART 1. PURCHASE PRICE AND TERMS OF SALE**

- A. Cash down payment, or value of trade or exchange. Do not include closing costs. \$ \_\_\_\_\_
- B. Prepaid interest. \$ \_\_\_\_\_
- C. 1st deed of trust. \_\_\_\_\_% interest for \_\_\_\_\_ years; lender's name \_\_\_\_\_ \$ \_\_\_\_\_
- D. 2nd deed of trust. \_\_\_\_\_% interest for \_\_\_\_\_ years; lender's name \_\_\_\_\_ \$ \_\_\_\_\_
- E. Additional loans. \_\_\_\_\_% interest for \_\_\_\_\_ years; lender's name \_\_\_\_\_ \$ \_\_\_\_\_
- F. Total purchase or acquisition price. Add items A through E. \$ \_\_\_\_\_
- G. If the purchase price is for less than 100% interest in the property acquired, indicate the percentage acquired: \_\_\_\_\_ %
  - YES  NO Has the controlling interest transferred?
  - YES  NO Is the proportional interest transferred the same before and after?
- H. Value of any current or delinquent improvement bond not included in purchase price. \$ \_\_\_\_\_
- I. Value of any transferable development rights not included in purchase price. \$ \_\_\_\_\_
  - YES  NO If a transfer of an unimproved lot, were entitlements included?
- J. If any delinquent taxes were assumed, indicate the amount: \$ \_\_\_\_\_
- K. If a trade was involved, indicate the value assigned to the traded property: \$ \_\_\_\_\_  
Address of the traded property: \_\_\_\_\_
- L. If the purchase price included other property such as fixtures, equipment, inventory, etc., indicate the allocated value and attach a summary. \$ \_\_\_\_\_
- M. Appraised value for financing purposes (land and building): \$ \_\_\_\_\_
- N. Net leasable building area in square feet: \_\_\_\_\_
- O. Realtor: \_\_\_\_\_ Title company: \_\_\_\_\_
- P.  YES  NO Tenants receive an allowance for interior improvements.
- Q.  YES  NO The monthly rent includes rent concessions. If YES, what are the concessions? \_\_\_\_\_
- R.  YES  NO Is the property designated as a landmark or historical structure?
- S.  YES  NO Is the property subject to city or county rent control ordinances?
- T. The condition of the property at the time of sale was:  Good  Average  Fair  Poor
- U. Please explain the physical condition of the property, and provide any other information that would assist the Assessor in determining the value of the property.

\_\_\_\_\_

**PLEASE COMPLETE LEASE INFORMATION ON REVERSE**

**CERTIFICATION**

*I certify (or declare) under penalty of perjury under the laws of the State of California 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. This declaration is binding on each and every co-owner and/or partner.*

SIGNATURE OF OWNER OR CORPORATE OFFICER ▶	DATE
NAME OF NEW OWNER/LEGAL REPRESENTATIVE/CORPORATE OFFICER	TITLE
E-MAIL ADDRESS	DAYTIME TELEPHONE ( )

**PART 2. LEASE INFORMATION**

BUSINESS NAME	LEASE TERMS						THE FOLLOWING EXPENSE AMOUNTS ARE PAID BY THE TENANT						
	SQ FT OF BLDG LEASED	LENGTH			RENT								
		BEGIN	END	OPTION	MONTHLY BASIC	OVERAGE	INS	MAINT	UTIL	JANITOR	PROP TAX	PARKING	OTHER
MO/YR	MO/YR	YEARS	\$	\$									

RENTAL INCOME AND EXPENSES			If off-street parking is provided, indicate the number of spaces:	
Total rental income collected for the year		\$	If improvements have been installed by the tenant, describe the items and estimate the costs:	
EXPENSES (yearly)			\$	
Insurance	\$		\$	
Maintenance	\$		If fixtures or equipment are included in the rent, describe the items, indicate where located, and the amount of allocated rent:	
Utilities	\$		\$	
Janitorial	\$		\$	
Parking Maintenance	\$		\$	
Property Management	\$		If rents were renegotiated today, indicate the estimated rent: \$	
Legal & Accounting	\$		Based upon the present rental schedule, assuming 100% occupancy and no collection losses, estimate the property's total annual income: \$	
Depreciation	\$			
Debt Service	\$			
Property Taxes	\$			
Other Expenses	\$			
	\$			
Total Expenses		\$		
Calendar or fiscal year ending		MO:	YR:	

**NOTE: IF THE PROPERTY IS COMPLETELY OWNER-OCCUPIED, PLEASE ENTER THE EXPENSE INFORMATION ONLY.**

**IMPORTANT NOTICE**

The law requires any transferee acquiring an interest in real property or manufactured home subject to local property taxation, and that is assessed by the county assessor, to file a Change of Ownership Statement with the County Recorder or Assessor. The Change of Ownership Statement must be filed at the time of recording or, if the transfer is not recorded, within 45 days of the date of the change in ownership, except that where the change in ownership has occurred by reason of death the statement shall be filed within 150 days after the date of death or, if the estate is probated, shall be filed at the time the inventory and appraisal is filed. The failure to file a Change of Ownership Statement within 45 days from the date of a written request by the Assessor results in a penalty of either: (1) one hundred dollars (\$100); or (2) 10 percent of the taxes applicable to the new base year value reflecting the change in ownership of the real property or manufactured home, whichever is greater, but not to exceed two thousand five hundred dollars (\$2,500) if that failure to file was not willful. This penalty will be added to the assessment roll and shall be collected like any other delinquent property taxes, and be subject to the same penalties for nonpayment.

**CHANGE IN OWNERSHIP STATEMENT**  
APARTMENT PROPERTY  
SUBJECT TO LOCAL PROPERTY TAXES

**This statement represents a written request from the Assessor. Failure to file will result in the assessment of a penalty.**

FILE THIS STATEMENT BY: \_\_\_\_\_

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

\_\_\_\_\_

ASSESSOR'S PARCEL NUMBER: \_\_\_\_\_

**PART 1. PURCHASE PRICE AND TERMS OF SALE**

- A. Cash down payment, or value of trade or exchange. Do not include closing costs. \$ \_\_\_\_\_
- B. Prepaid interest. \$ \_\_\_\_\_
- C. 1st deed of trust. \_\_\_\_\_% interest for \_\_\_\_\_ years; lender's name \_\_\_\_\_ \$ \_\_\_\_\_
- D. 2nd deed of trust. \_\_\_\_\_% interest for \_\_\_\_\_ years; lender's name \_\_\_\_\_ \$ \_\_\_\_\_
- E. Additional loans. \_\_\_\_\_% interest for \_\_\_\_\_ years; lender's name \_\_\_\_\_ \$ \_\_\_\_\_
- F. Total purchase or acquisition price. Add items A through E. \$ \_\_\_\_\_
- G. If the purchase price is for less than 100% interest in the property acquired, indicate the percentage acquired: \_\_\_\_\_%
  - YES  NO Has the controlling interest transferred?
  - YES  NO Is the proportional interest transferred the same before and after?
- H. Value of any current or delinquent improvement bond not included in purchase price. \$ \_\_\_\_\_
- I. Value of any transferable development rights not included in purchase price. \$ \_\_\_\_\_
- J. If any delinquent taxes were assumed, indicate the amount: \$ \_\_\_\_\_
- K. If a trade was involved, indicate the value assigned to the traded property: \$ \_\_\_\_\_  
Address of the traded property: \_\_\_\_\_
- L. If the purchase price included other property such as apartment furniture, indicate the allocated value and attach a summary. Do not include kitchen appliances, carpet, or drapes. \$ \_\_\_\_\_
- M. Appraised value for financing purposes (land and building): \$ \_\_\_\_\_
- N. What unit price, gross rent multiplier, net capitalization rate, or return on equity was used to arrive at a purchase price? \_\_\_\_\_
- O. Realtor: \_\_\_\_\_ Title company: \_\_\_\_\_
- P.  YES  NO Is the property designated as a landmark or historical structure?
- Q.  YES  NO Is the property subject to city or county rent control ordinances?
- R. The condition of the property at the time of sale was:  Good  Average  Fair  Poor
- S. Please explain the physical condition of the property, and provide any other information that would assist the Assessor in determining the value of the property.

**PLEASE COMPLETE SCHEDULES ON REVERSE**

**CERTIFICATION**

*I certify (or declare) under penalty of perjury under the laws of the State of California 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. This declaration is binding on each and every co-owner and/or partner.*

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E-MAIL ADDRESS	DAYTIME TELEPHONE ( )

**PART 2. RENTAL INCOME AND EXPENSE INFORMATION**

APARTMENT NAME	APARTMENT ADDRESS	ASSESSOR'S PARCEL NUMBER
MANAGER'S NAME	MANAGER'S ADDRESS	TELEPHONE (     )
OWNER'S NAME	OWNER'S ADDRESS	TELEPHONE (     )

**CURRENT SCHEDULE OF RENTS**

UNITS		BEDROOMS PER UNIT	BATHS PER UNIT	RENT PER UNIT PER MONTH	AVG VACANCY
TYPE	QTY				
A					
B					
C					
D					
E					
F					
G					
H					
I					
J					

**20 \_\_ ANNUAL EXPENSES**

ADMINISTRATIVE EXPENSES	
MANAGEMENT FEE	
MANAGER'S SALARY	
MANAGER'S APARTMENT	
OFFICE EXPENSE	
LEGAL AND ACCOUNTING	
RENTAL EXPENSE	
ADVERTISING	
OPERATING EXPENSES	
ELECTRICITY	
GAS	
WATER	
TRASH REMOVAL	
CABLE TV	
MAINTENANCE EXPENSES	
PAYROLL	
SUPPLIES	
REPAIRS	
LANDSCAPING	
POOL SERVICES	
FIXED CHARGES	
INSURANCE	
PROPERTY TAX	
LICENSES	
OTHER (ATTACH)	
TOTAL	

**20 \_\_ ANNUAL INCOME**

INCOME TYPE	ANTICIPATED GROSS	VACANCY AND COLLECTION	ACTUAL INCOME
APARTMENTS*			
PARKING			
LAUNDRY			
VENDING			
DEPOSITS KEPT			
FURNITURE			
OTHER			
TOTAL			

\*INCLUDE MANAGER'S AND OWNER'S APARTMENTS

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