

# COUNTY OF VENTURA

Office of the Assessor

Dan Goodwin, MAI

800 South Victoria Avenue, Ventura, CA 93009-1270

## CHANGE IN OWNERSHIP STATEMENT REAL PROPERTY OR MANUFACTURED HOMES SUBJECT TO LOCAL PROPERTY TAXES

CORRECT MAILING ADDRESS IF NECESSARY

Name and Address of Buyer/Transferee (LAST NAME, FIRST NAME(S), INITIAL)

PROPERTY ADDRESS:	
APN	
FOR ASSESSOR'S USE ONLY	
DOC.NR	EMP.NR
SP	DOC.DT

Seller/Transferor (LAST NAME, FIRST NAME(S), INITIAL)

FILE THIS STATEMENT BY:

### 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 ASSESSOR, TO FILE A CHANGE IN OWNERSHIP STATEMENT WITH THE COUNTY RECORDER OR ASSESSOR. THE CHANGE IN 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 IN 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.

This notice is a written request from the Office of Assessor for a Change in Ownership Statement. If you do not file this statement, it will result in the assessment of a penalty. This statement will be held secret as required by Section 481 of the Revenue and Taxation Code.

The property which you acquired may be subject to a supplemental assessment in an amount to be determined by the Ventura County Assessor. For further information on your supplemental roll obligation, please call the Ventura County Assessor at (805) 654-2181. FAX (805) 645-1305.

#### PART I: TRANSFER INFORMATION

Please answer all questions.

- |                          |                          |   |
|--------------------------|--------------------------|---|
| YES                      | NO                       |   |
| <input type="checkbox"/> | <input type="checkbox"/> | A. Is this transfer solely between husband and wife? (addition of spouse, death of a spouse, divorce settlement, etc.)?   |
| <input type="checkbox"/> | <input type="checkbox"/> | B. Is this transaction only a correction of the name(s) of the person(s) holding title to the property (e.g. a name change upon marriage)?<br>Please explain: _____   |
| <input type="checkbox"/> | <input type="checkbox"/> | C. Is this document recorded to create, terminate, or reconvey a lender's interest in the property?   |
| <input type="checkbox"/> | <input type="checkbox"/> | D. Is this transaction recorded only as a requirement for financing purposes or to create, terminate, or reconvey a security interest (e.g., cosigner)? Please explain: _____   |
| <input type="checkbox"/> | <input type="checkbox"/> | E. Is this document recorded to substitute a trustee of a trust, mortgage, or other similar document?   |
| <input type="checkbox"/> | <input type="checkbox"/> | F. Did this transfer result in the creation of a joint tenancy in which the seller (transferor) remains as one of the joint tenants?  |
| <input type="checkbox"/> | <input type="checkbox"/> | G. Does this transfer return property to the person who created the joint tenancy (original transferor)?  |
| <input type="checkbox"/> | <input type="checkbox"/> | H. Is this transfer of property:  |
| <input type="checkbox"/> | <input type="checkbox"/> | 1. to a revocable trust that may be revoked by the transferor and is for the benefit of the <input type="checkbox"/> transferor and/or <input type="checkbox"/> transferor's spouse?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. to a trust that may be revoked by the Creator/Grantor who is also a joint tenant, and which names the other joint tenant(s) as beneficiaries when the Creator/Grantor dies?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. to an irrevocable trust for the benefit of the <input type="checkbox"/> Creator/Grantor and/or <input type="checkbox"/> Grantor's spouse?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. to an irrevocable trust from which the property reverts to the Creator/Grantor within 12 years?  |
| <input type="checkbox"/> | <input type="checkbox"/> | I. If this property is subject to a lease, is the remaining lease term 35 years or more including written options?  |
| <input type="checkbox"/> | <input type="checkbox"/> | *J. Is this a transfer between parent(s) and child(ren)? <input type="checkbox"/> Yes <input type="checkbox"/> No or from grandparent(s) to grandchild(ren) <input type="checkbox"/> Yes <input type="checkbox"/> No                    |
| <input type="checkbox"/> | <input type="checkbox"/> | *K. Is this transaction 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"/> | *L. Is this transaction to replace a principal residence by a person who is severely disabled as defined by Revenue and transaction Code section 69.5? Within the same county? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> | <input type="checkbox"/> | M. Is this transfer solely between domestic partners currently registered with the California Secretary of State?   |
| <input type="checkbox"/> | <input type="checkbox"/> | N. Is this a transfer between parties in which proportional interests and transferor(s) and transferee(s) remain the same after the transfer?   |

\*If you answered yes to J, K or L, you may qualify for a property tax reassessment exclusion, which may result in lower taxes on your property. If you do not file a claim, it will result in the reassessment of the property.

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

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

**PART II: OTHER TRANSFER INFORMATION**

- A. Date of transfer if other than recording date \_\_\_\_\_
- B. Type of transfer. Please check appropriate box.  
 Purchase  Foreclosure  Gift  Trade or Exchange  Merger, Stock, or Partnership Acquisition  
 Contract of Sale -- Date of Contract \_\_\_\_\_  Sale / Leaseback  
 Inheritance -- Date of Death \_\_\_\_\_ Other: Please explain: \_\_\_\_\_  
 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) \_\_\_\_\_
- C. Was only a partial interest in the property transferred?  Yes  No  
 If yes, indicate the percentage transferred \_\_\_\_\_%

**PART III: PURCHASE PRICE & TERMS OF SALE**

- A. CASH DOWN PAYMENT OR Value of Trade or Exchange (excluding closing costs) Amount \$ \_\_\_\_\_
- B. FIRST DEED OF TRUST @ \_\_\_\_\_% interest for \_\_\_\_\_ years. Pymts./Mo. = \$ \_\_\_\_\_ (Prin. & Int. only) Amount \$ \_\_\_\_\_  
 FHA  Fixed Rate  New Loan  
 Conventional  Variable Rate  Assumed Existing Loan Balance  
 VA  All inclusive D.T. (\$ \_\_\_\_\_ Wrapped)  Bank or Savings & Loan  
 Cal-Vet  Loan Carried by Seller  Finance Company  
 Balloon Payment  Yes  No Due Date \_\_\_\_\_ Amount \$ \_\_\_\_\_
- C. 2ND DEED OF TRUST @ \_\_\_\_\_% interest for \_\_\_\_\_ years. Pymts./Mo. = \$ \_\_\_\_\_ (Prin. & Int. only) Amount \$ \_\_\_\_\_  
 Bank or Savings & Loan  Fixed Rate  New Loan  
 Loan Carried by Seller  Variable Rate  Assumed Existing Loan Balance  
 Balloon Payment  Yes  No Due Date \_\_\_\_\_ Amount \$ \_\_\_\_\_
- D. OTHER FINANCING: Is other financing involved not covered in (b) or (c) above?  Yes  No Amount \$ \_\_\_\_\_  
 Type \_\_\_\_\_ @ \_\_\_\_\_% interest for \_\_\_\_\_ years. Pymts./Mo. = \$ \_\_\_\_\_ (Prin. & Int. only)  
 Bank or Savings & Loan  Fixed Rate  New Loan  
 Loan Carried by Seller  Variable Rate  Assumed Existing Loan Balance  
 Balloon Payment  Yes  No Due Date \_\_\_\_\_ Amount \$ \_\_\_\_\_
- E. WAS AN IMPROVEMENT BOND ASSUMED BY THE BUYER?  Yes  No Outstanding Balance: Amount \$ \_\_\_\_\_
- F. TOTAL PURCHASE PRICE (or acquisition price, if traded or exchanged, include real estate commission if paid.) Total Items A through E \$ \_\_\_\_\_
- G. PROPERTY PURCHASED  Through a broker  Direct from seller  From a family member  Other (explain) \_\_\_\_\_  
 If purchased through a broker, provide broker's name and phone number: \_\_\_\_\_  
 Please explain any special terms, seller concessions, or financing and any other information that would help the Assessor understand the purchase price and terms of sale. \_\_\_\_\_

**PART IV: PROPERTY INFORMATION**

- A. TYPE OF PROPERTY TRANSFERRED  
 Single-family residence  Agricultural  Timeshare  
 Multiple-family residence (no. of units: \_\_\_\_\_)  Co-op/Own-your-own  Manufactured Home  
 Commercial/Industrial  Condominium  Unimproved lot  
 Other (Description: \_\_\_\_\_)
- B. IS THIS PROPERTY INTENDED AS YOUR PRINCIPAL RESIDENCE?  Yes  No  
 If yes, enter date of occupancy \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_\_\_ or intended occupancy \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_\_\_  
 (Month) (Day) (Month) (Day)
- C. IS PERSONAL/BUSINESS PROPERTY INCLUDED IN PURCHASE PRICE? (e.g. furniture, farm equipment, machinery, etc.)?  
 (Other than a manufactured home subject to local property tax?)  Yes  No  
 If yes, enter the value of the personal /business property included in the purchase price \$ \_\_\_\_\_ (Must attach itemized list)
- D. IS A MANUFACTURED HOME INCLUDED IN THE PURCHASE PRICE?  Yes  No  
 If yes, how much of the purchase price is allocated to the manufactured home? \$ \_\_\_\_\_  
 Is the manufactured home subject to local property tax?  Yes  No What is the decal number? \_\_\_\_\_
- E. DOES THE PROPERTY PRODUCE INCOME?  Yes  No If yes, is the income from:  
 Lease/Rent  Contract  Mineral Rights  Other--Explain: \_\_\_\_\_
- F. WHAT WAS THE CONDITION OF THE PROPERTY AT THE TIME OF SALE?  
 Good  Average  Fair  Poor  
 Please explain the physical condition of the property and provide any other information (such as restrictions, etc.) that would assist the Assessor in determining the value of the property: \_\_\_\_\_

**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, correct, and complete to the best of my knowledge and belief. This declaration is binding on each and every co-owner and/or partner.

Signed in County of \_\_\_\_\_, California, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

SIGNATURE OF OWNER OR CORPORATE OFFICER	TITLE, (if corporate officer/partner)	E-MAIL ADDRESS (optional)
NAME OF NEW OWNER/LEGAL REPRESENTATIVE/CORPORATE OFFICER (typed or printed)		PHONE NUMBER (8 a.m. - 5 p.m.)