EF-502-A-R15-0221-21004016-1 BOE-502-A (P1) REV. 15 (02-21)

PRELIMINARY CHANGE OF OWNERSHIP REPORT



SHELLY SCOTT ASSESSOR-RECORDER-COUNTY CLERK

CHANGE IN OWNERSHIP PO Box C, Civic Center Branch San Rafael, CA 94913 PH (415) 473-7231 FAX (415) 473-6542 www.marincounty.org

| 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 of Ownership Report must be filed |
| with each conveyance in the County Recorder's office for the county |
| where the property is located. |

NAME AND MAILING ADDRESS OF BUYER/TRANSFEREE (Make necessary corrections to the printed name and mailing address) ASSESSOR'S PARCEL NUMBER Bolinas Community Public Utility 2PN Bolinas Beach Public Utility Di P.O. BOX 390 BUYER'S DAYTIME TELEPHONE NUMBER LBolinas, California (415) 868 - 1226 BUYER'S EMAIL ADDRESS STREET ADDRESS OR PHYSICAL LOCATION OF REAL PROPERTY DAY **IYEAR** This property is intended as my principal residence. If YES, please indicate the date of occupancy or intended occupancy. YES NO Are you a disabled veteran or a unmarried surviving spouse of a disabled veteran who was compensated at 100% by the Department of Veterans Affairs? MAIL PROPERTY TAX INFORMATION TO (NAME) Rev + Tax Coda & 11922 - tax exempt govern MAIL PROPERTY TAX INFORMATION TO (ADDRESS) PART 1. TRANSFER INFORMATION Please complete all statements. This section contains possible exclusions from reassessment for certain types of transfers. A. This transfer is solely between spouses (addition or removal 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 (addition or removal of a partner, death of a partner, termination settlement, etc.). *C. This is a transfer: between parent(s) and child(ren) between grandparent(s) and grandchild(ren). Was this the transferor/grantor's principal residence? YES NO *D. This transfer is the result of a cotenant's death. Date of death * E. This transaction is to replace a principal residence owned by a person 55 years of age or older. Within the same county? | YES * F. This transaction is to replace a principal residence by a person who is severely disabled. Within the same county? | YES | NO *G. This transaction is to replace a principal residence substantially damaged or destroyed by a wildfire or natural disaster for which the Governor proclaimed a state of emergency. Within the same county? | YES | NO H. 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: from Bolinas Beech Public Utility District to Bolinas Community utility District I. The recorded document creates, terminates, or reconveys a lender's interest in the property. J. 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: K. The recorded document substitutes a trustee of a trust, mortgage, or other similar document. L. 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 an irrevocable trust for the benefit of the creator/grantor/trustor and/or | grantor's/trustor's spouse ☐ grantor's/trustor's registered domestic partner. M. This property is subject to a lease with a remaining lease term of 35 years or more including written options. N. This is a transfer between parties in which proportional interests of the transferor(s) and transferee(s) in each and every parcel being transferred remain exactly the same after the transfer. O. This is a transfer subject to subsidized low-income housing requirements with governmentally imposed restrictions, or restrictions imposed by specified nonprofit corporations.. P. This transfer is to the first purchaser of a new building containing an active solar energy system. Q. Other. This transfer is to * Please refer to the instructions for Part 1.

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



BOE-502-A (P2) REV. 15 (02-21)

| PART 2. OTHER TRANSFER INFORMATION | Check and complete as applica | able. | |
|---|---|---|--|
| 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: 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): Other. Please explain: OFFECT NAME OF THUE HOUDER | | | |
| 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 A. Total purchase price | Check and complete as applic | \$ | |
| B. Cash down payment or value of trade or exchange excluding closin | ig costs | Amount \$ | |
| | ly payment \$ | Amount \$ | |
| FHA (Discount Points) | | | |
| Bank/Savings & Loan/Credit Union Loan carried by seller | | | |
| Balloon payment \$ Due date: | | | |
| D. Second deed of trust @% interest for years. Monthly payment \$ Amount \$ | | | |
| Fixed rate Variable rate Bank/Savings & Loan/Credit Union Loan carried by seller | | | |
| Balloon payment \$ Due date: | | | |
| E. Was an Improvement Bond or other public financing assumed by the buyer? YES NO Outstanding balance \$ | | | |
| F. Amount, if any, of real estate commission fees paid by the buyer which are not included in the purchase price \$ | | | |
| G. The property was purchased: Through real estate broker. Broker name: Phone number: | | | |
| U Direct from seller From a family member-Relationship | | | |
| Other. Please explain: | | | |
| H. Please explain any special terms, seller concessions, broker/agent fees waived, financing, and any other information (e.g., buyer assumed the existing loan balance) that would assist the Assessor in the valuation of your property. | | | |
| | The figure property. | | |
| PART 4. PROPERTY INFORMATION | Check and complete as applic | cable. | |
| A. Type of property transferred | • | | |
| Single-family residence | Co-op/Own-your-own | Manufactured home | |
| Multiple-family residence. Number of units: | Condominium | Unimproved lot | |
| Other. Description: (i.e., timber, mineral, water rights, etc.) | Timeshare | Commercial/Industrial | |
| B. YES NO Personal/business property, or incentives, provided | d by collecte buyer are included in the pure | hase price Everples of personal | |
| B. YES NO Personal/business property, or incentives, provided property are furniture, farm equipment, machinery, | etc. Examples of incentives are club member | erships, etc. Attach list if available. | |
| If YES, enter the value of the personal/business property: | \$Incen | tives \$ | |
| C. YES NO A manufactured home is included in the purchase | price. | | |
| If YES, enter the value attributed to the manufactured home: \$ | | | |
| YES NO The manufactured home is subject to local property tax. If NO, enter decal number: | | | |
| D. YES NO The property produces rental or other income. | | | |
| If YES, the income is from: X Lease/rent Contract Mineral rights Other: | | | |
| E. The condition of the property at the time of sale was: | Average Fair | Poor | |
| Please describe: | | | |
| CERTIFICATION | | | |
| I certify (or declare) 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. | | | |
| SIGNATURE OF BUYERTRANSPEREE OR CORPORATE OFFICER | DATE 1/2/21/ | TELEPHONE 1221/ | |
| your oned | (D) FACE DDINE) TITLE | (415) 860 - 1214 | |
| NAME OF BUYER/TRANSFEREE/PERSONAL REPRESENTATIVE/CORPORATE OFFICER (| P.D. DRECIOENT | EMAIL ADDRESS | |
| The Assessor's office may contact you for ad | Iditional information regarding this transact | tion. | |
| , | | | |