

**COUNTY OF SAN LUIS OBISPO
CLAIM FOR REFUND OF OVERPAYMENT OF REAL PROPERTY TRANSFER TAX
(R & T CODE SEC. 5096)**

Submit to: County of San Luis Obispo Clerk-Recorder, 1055 Monterey Street, Suite D120, San Luis Obispo, CA 93408

The undersigned requests a refund of real property transfer tax submitted to the County of San Luis Obispo Clerk-Recorder on the following described transaction:

1. RECORDING REFERENCE OF DOCUMENT

- a. Title of Document Recorded _____
- b. City or Unincorporated _____
- c. Recording Reference of Document _____
(Year & Document Number)
- d. Recording Reference of **Corrected** Document _____
(Year & Document Number) **REQUIRED FOR REFUND**

2. RECORDING REFERENCE OF TRUST DEED ASSUMED

- a. Date of Recording _____
- b. Recording Reference Of Document _____
(Year & Document Number)

3. COMPUTATION OF TAX LIABILITY

- a. Total Consideration/Value _____
- b. Less Assumable Trust Deeds _____
- c. Net Consideration/Value _____

4. COMPUTATION OF REFUND REQUEST

- a. Transfer Tax Paid _____
- b. Transfer Tax Due _____
- c. Sum of Refund Requested _____

5. REASON FOR REFUND: Provide a complete explanation below and attach necessary documentation to support your claim.

I CERTIFY THAT THE INFORMATION AND EXPLANATION GIVEN ABOVE ARE VALID AND, THEREFORE, CONSTITUTES A LEGAL CLAIM FOR A REFUND OF THE REAL PROPERTY TRANSFER TAX.

Firm/Claimant Name: _____

Signature of Claimant: _____

Mailing Address: _____

(Street / PO Box)

(City, State, Zip)

Date: _____

To be completed by the County of San Luis Obispo Clerk-Recorder

Approved: _____

Denied: _____

ELAINA CANO
County Clerk-Recorder

By: _____
Deputy Clerk

Date: _____