

REAL PROPERTY CONVEYANCE FEE STATEMENT OF VALUE AND RECEIPT
 If exempt by O.R.C. 319.54 (F) (3), Use DTE Form 100 (Ex)

TYPE OR PRINT ALL INFORMATION

SEE INSTRUCTIONS ON REVERSE SIDE

FOR COUNTY AUDITOR'S USE ONLY

Type Instrument	Tax List Year	County Number 31	Tax Dist. Number	Date
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Property Located in _____ Taxing District _____ Number _____
 Name on Tax Duplicate _____ Tax Duplicate Year _____
 Acct. or Permanent Parcel No. _____ Map Book _____ Page _____ No. of Parcels _____
 Description: _____ Platted Unplatted

AUDITOR'S COMMENTS _____ DTE Code No _____
 Split New Plat
 C.A.U.V. Building Removed
 New Improvements Partial Value Other _____ OWNER OCCUPIED Yes No
 Neigh. Code _____

GRANTEE OR REPRESENTATIVE MUST COMPLETE ALL QUESTIONS IN THIS SECTION		
1. Grantor: _____	Phone: _____	
Address: _____		Optional
2. Grantee: _____		Phone: _____
3. Address of Property: _____		Optional
4. GRANTEE'S Permanent Mailing Address (if different than address of property): _____		
5. Tax Billing Address (if different than address of property): _____		
6. Are there buildings on the land? No _____ Yes _____ (requires information below)		
_____ 1, 2, or 3 family _____ Manufactured Home _____ Condominium _____ Apartment - Number of Units _____ _____ Farm Building _____ Other - _____ If land is vacant, what is intended use? _____		
7. Conditions of Sale (Check all that apply):		
<input type="checkbox"/> Grantor is a relative <input type="checkbox"/> Part Interest Transferred <input type="checkbox"/> Grantor is a Mortgagee <input type="checkbox"/> Land Contract <input type="checkbox"/> Gift <input type="checkbox"/> Trade <input type="checkbox"/> Life Estate <input type="checkbox"/> Leasehold <input type="checkbox"/> Mineral Rights Reserved <input type="checkbox"/> Leased Fee <input type="checkbox"/> Other: _____		
8. (A) New Mortgage Amount (if any) _____ \$ _____		
(B) Balance Assumed (if any) _____ \$ _____		
(C) Cash (if any) _____ \$ _____		
(D) Total Consideration (8A + 8B + 8C) _____ \$ _____		
(E) Portion, if any, of total consideration paid for items other than real property _____ \$ _____		
(F) Consideration for real property on which fee is to be paid (8D minus 8E) _____ \$ _____		
(G) if gift, in whole or part, estimated market value _____ \$ _____		
(H) Type of mortgage _____ Conventional _____ FHA _____ VA _____ Other _____		
(I) Name of mortgagee _____		
9. Grantor indicates that this property is entitled to receive the senior citizen, disabled person, or surviving spouse homestead exemption for the preceding or current tax year. No _____ Yes _____ (DTE Form 101 required)		
10. Grantor indicates that this property qualifies for current agricultural use valuation for the preceding or current tax year. No _____ Yes _____ (DTE Form 102 required)		
11. Application for 2- 1/2 % Reduction (NOTICE: failure to complete this application prohibits the owner from receiving this reduction until another proper and timely application is filed): Will this property be grantee's principal residence by January 1 of next year? Yes _____ No _____ If yes, is the property a multi-unit dwelling? Yes _____ No _____		
12. Is this property leased or otherwise rented to tenants solely for residential purposes? No _____ Yes _____ If yes, new owner must complete and submit a Rental Registration Form to the County Auditor within 60 days (including weekends and holidays) of the date of this transfer to avoid a penalty on their tax bill.		
I DECLARE UNDER PENALTIES OF PERJURY THAT THIS STATEMENT HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE STATEMENT.		
PRINTED NAME of GRANTEE or REPRESENTATIVE _____		DATE _____
SIGNATURE of GRANTEE or REPRESENTATIVE _____		

Number
 Taxing District
 No. of Parcels
 DTE Code No
 Neigh. Code
 No. of Acres
 Land Value
 Bldg. Value
 Total Value
 Consideration
 Valid Sale
 1. YES 2. NO
 Receipt Number

**INSTRUCTIONS TO GRANTEE OR REPRESENTATIVE FOR COMPLETING
REAL PROPERTY CONVEYANCE FEE STATEMENT OF VALUE**

COMPLETE LINES 1 THROUGH 11 IN BOX ONLY

WARNING: ALL QUESTIONS MUST BE COMPLETED TO THE BEST OF YOUR KNOWLEDGE IN ORDER TO COMPLY WITH THE PROVISIONS OF THE OHIO REVISED CODE SECTION 319.202 AND THE CONVEYANCE STANDARDS ADOPTED BY THE COUNTY AUDITOR AND THE COUNTY ENGINEER, AS REQUIRED BY 319.203. PERSONS WILLFULLY FAILING TO COMPLY OR FALSIFYING INFORMATION ARE GUILTY OF A MISDEMEANOR OF THE FIRST DEGREE (O.R.C. 319.99). IT IS IMPORTANT THAT THE INFORMATION ON THIS FORM BE ACCURATE AS IT WILL BE USED TO DETERMINE WHETHER ALL REAL PROPERTY, INCLUDING THIS PROPERTY, IS UNIFORMLY ASSESSED FOR REAL PROPERTY TAX PURPOSES.

NOTE: THE COUNTY AUDITOR HAS DISCRETIONARY POWER UNDER SECTION 319.202 (A) TO REQUEST ADDITIONAL INFORMATION IN ANY FORM OF DOCUMENTATION DEEMED NECESSARY TO VERIFY THE ACCURACY OF THE INFORMATION PROVIDED BY THE GRANTEE ON THE FRONT OF THE FORM.

Line 1) List grantor's name as shown in the deed or other instrument conveying this real property, along with grantor's address.

Line 2) List grantee's name as shown in the deed or other instrument conveying this real property.

Line 3) List address of property conveyed by house number and street.

Line 4) List grantee's permanent mailing address if different than address of property conveyed.

Line 5) List complete address to which tax bills are to be sent if different than address of property conveyed.

**CAUTION: EACH PROPERTY OWNER IS RESPONSIBLE FOR PAYING THE PROPERTY TAXES ON TIME
EVEN IF NO BILL IS RECEIVED.**

Line 6) If there are no buildings on the land conveyed check box "No". If there are buildings check box "Yes" and the appropriate box that describes the type of building. If other, describe briefly the type of building such as "office building".

Line 7) Show any special condition of sale that would affect the consideration. If any of the special conditions noted are involved check the appropriate box. Briefly describe other conditions in the space provided.

Line 8) A) Enter amount of new mortgage on this property (if any).
B) Enter amount of the balance assumed on an existing mortgage (if any).
C) Enter cash paid for this property (if any).
D) Add lines 8A, 8B, and 8C.
E) If any portion of the consideration reported on line 8D was paid for items other than real property, enter the portion of the consideration paid for those items.
F) Deduct line 8E from line 8D and enter the difference on this line.
G) In the case of a gift, in whole or part, enter the estimated price the real estate described in the deed would bring in the open market.
H) Check type of mortgage
I) List mortgagee or mortgagees (The party who advances the funds for a mortgage loan).

Line 9) If the grantor has indicated that the property to be conveyed will receive the senior citizen, disabled person or surviving spouse homestead exemption for the preceding or current tax year under O.R.C. section 323.152 (A), the grantee and grantor must complete DTE FORM 101, or submit a statement which complies with the provisions of O.R.C. section 319.202 (A)(2) and submit such form to the county auditor along with this conveyance fee statement.

Line 10) If the grantor has indicated that the property to be conveyed was qualified for current agricultural use valuation for the preceding or current year under O.R.C. section 5713.30, the grantor must complete DTE FORM 102, or a statement that complies with O.R.C. section 319.202 (B)(2), and submit such form to the county auditor along with this conveyance fee statement.

Line 11) Complete line 11 (Application For 2-1/2% Reduction) only if the parcel is used for residential purposes. To receive the 2-1/2% homestead tax reduction for next year, you must own and occupy your home as your principal place of residence (domicile) on January 1 of that year. A homeowner and spouse may receive this reduction on only one home in Ohio. Failure to complete this application prohibits the owner from receiving this reduction until another proper and timely application is filed.

The real property conveyance fee is payable on the amount of money reported on either item 8F or 8G.

Additionally, Hamilton County collects a permissive tax.