

# STATEMENT OF CONVEYANCE OF HOMESTEAD PROPERTY

To be Attached to Conveyance Fee Forms, DTE 100 & 100(EX)

Grantor's Name \_\_\_\_\_

Grantor's Address \_\_\_\_\_

Grantee's Name \_\_\_\_\_

Taxing District \_\_\_\_\_ Parcel or Account No. \_\_\_\_\_

The grantor of the property referred to above states that the property has or will receive the senior citizen, disabled persons, or surviving spouse homestead exemption under Ohio Revised Code section 323.152(A) for the preceding or current tax year. The estimated amount of such reduction that will be reflected in the grantee's taxes is:

Preceding Tax Year \$ \_\_\_\_\_ Current Tax Year \$ \_\_\_\_\_

The grantor and the grantee have considered and accounted for the total estimated amount of such reductions to the satisfaction of both the grantee and the grantor.

\_\_\_\_\_  
Signature of Grantor or Representative

Sworn to or affirmed in my presence,

this \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_.

\_\_\_\_\_  
Notary Public

### Endorsement by County Auditor:

Upon presentation of this instrument, the County Auditor shall endorse it, return it to the grantee or his representative, and provide a copy of the indorsed instrument to the grantor or his representative, evidencing delivery to the County Auditor.

County Auditor: \_\_\_\_\_

Date: \_\_\_\_\_