

County name \_\_\_\_\_

## Tax Incentive Program – Application for Real Property Tax Exemption and Remission

Date received by county auditor
---------------------------------

Date received by DTE
----------------------

<b>Office Use Only</b>
County application number
DTE application number

### General Instructions

- Submit three copies of this application to the auditor's office in the county where the property is located (make a copy for your records). The final deadline for filing with the county auditor is Dec. 31 of the year for which exemption is sought. If you need assistance in completing this form, contact your county auditor.
- Both the county auditor's finding (page 3) and the treasurer's certificate (page 4) of this application must be completed. Ask your county auditor for the procedure to follow to obtain the treasurer's certificate. When presented with this application, the county treasurer should promptly complete the certificate and return the application to you so it may be filed with the county auditor. The county treasurer should make certain that the treasurer's certificate is complete and accurately reflects the payment status of taxes, special assessments penalties and interest, by tax year. Obtain a copy of the property record card from the county auditor and enclose it with this application. It is the applicant's responsibility to make sure the information supplied by the county auditor and county treasurer is complete and accurate.
- Answer all questions on the form. If you need more room for any question, use additional sheets of paper to explain details. Please indicate which question each additional sheet is answering. This application must be signed by the property owner or the property owner's representative.

### Special Instructions for Tax Increment Financing Exemptions

If the applicant requests an exemption under Ohio Revised Code (R.C.) 725.02, 1728.10, 5709.40, 5709.41, 5709.73 or 5709.78, the application can be signed by the property owner, the property owner's representative, the political subdivision without the property owner's consent, or the political subdivision with the property owner's consent acting under a power of attorney (attach DTE form 24P). If the application is signed by the political subdivision without the property owner's consent, such exemption shall be subordinate to an exemption granted under any other section of the Revised Code and service payments shall not be required for the portion of the property exempt under that other section. If the exemption requested involves service payments in lieu of taxes and the application is signed by the property owner, the property owner's representative, or the political subdivision with the property owner's consent acting under a power of attorney, those payments will remain in effect for the term of the exemption even if the property is used later for another exempt purpose, unless the political subdivision consents in writing to the subsequent exemption. These service payments are also binding on future owners if the political subdivision or the property owner files a notice with the county recorder after the tax commissioner approves the application, unless the political subdivision consents in writing to the subsequent exemption. Failure to file such notice relieves only future owners from the obligation to make service payments if the property becomes exempt under any other provision of the Revised Code. Consent by a property owner filed with the tax commissioner after the commissioner has approved an application for exemption originally filed by the political subdivision without the property owner's consent will trigger the same procedures mentioned above for an application filed by or with the property owner's consent.

### Please Type or Print Clearly

Applicant name	Name
Notices concerning this application should be sent to	Name (if different from applicant)
	Address
	City
	State
	ZIP
	Telephone number

**Application is hereby made to have the following property placed on the tax-exempt list pursuant to the authorizing agreement, ordinance or resolution, and the limitations in the Ohio Revised Code.**

1. Parcel number(s). (If more than four, continue on an attached sheet.) **All parcels must be in the same school district.** a) \_\_\_\_\_  
b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_
2. School district where located \_\_\_\_\_
3. Street address or location of property \_\_\_\_\_
4. a) Title to this property is in the name of \_\_\_\_\_  
b) Address of owner \_\_\_\_\_
5. Date title was acquired \_\_\_\_\_
6. If title holder is different from applicant, please explain \_\_\_\_\_
7. Under what section(s) of the Ohio Revised Code is exemption sought?  
 §725.02       §1728.10       §5709.40(B)       §5709.40(C)       §5709.41  
 §5709.62       §5709.63       §5709.71       §5709.73(B)       §5709.73(C)  
 §5709.78(A)       §5709.78(B)       §5709.88  
 Other incentive program, specify R.C. section \_\_\_\_\_
8. Explain terms and details of incentive (real property included, percentage exempted, number of years, etc.).  
\_\_\_\_\_
9. a) Attach a copy of the resolution or ordinance of the subdivision granting the incentive and/or the applicant's incentive agreement with the subdivision.  
b) Attach a copy of school district approval (if required).
10. If this application requests exemption under a tax increment financing provision (see special instructions), please indicate whether the application is being filed.  
 By the property owner       By the political subdivision without owner consent  
 By the political subdivision with owner consent (attach copies of DTE form 24P)

I declare under penalty of perjury that I have examined this application and, to the best of my knowledge and belief, it is true, correct and complete.

\_\_\_\_\_  
Applicant or representative signature

\_\_\_\_\_  
Print name and title

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
ZIP code

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Date

### County Auditor's Finding

	Land	Building	Total
Taxable value in year of application _____ (tax year)			
Taxable value in prior year _____ (tax year)			

**This application covers property that is (check all that apply):**

Currently exempt\*     
  New construction on previously exempted parcel     
  Currently on CAUV

Previously exempt     
  Previously on CAUV

**Auditor's recommendation**  
  Grant     
  Partial grant     
  Deny     
  None

**Comments:**

\_\_\_\_\_ **County auditor (signature)**

\_\_\_\_\_ **Date**

\*If the property or any portion of the property is currently exempt, please indicate below the type of exemption, the portion of property exempted and the tax years to which the current exemption applies.

**Treasurer's Certificate**

If the treasurer's certificate is not properly filled out and signed, the tax commissioner will have **no jurisdiction** to act on the application and **it will be subject to dismissal**.

**(Notice to treasurer:** The first paragraph of this certificate must always be complete.)

I hereby certify that all **taxes, special assessments, penalties and interest** levied and assessed against the above described property have been paid in full to up and including the tax year \_\_\_\_\_. The most recent year for which taxes and special assessments have been charged is tax year \_\_\_\_\_.

I further certify that the only **unpaid taxes, special assessments, penalties and interest** that have been charged against this property are as follows:

Parcel Number	Tax Year	Taxes (including penalties and interest)	Special Assessments (including penalties and interest)

*If additional years are unpaid, please list on an attached sheet.*

Have tax certificates been sold under R.C. 5721.32 or 5721.33 for any of the property subject to this application?  Yes  No

Are any unpaid taxes listed on this certificate subject to a valid delinquent tax contract under R.C. 323.31(A)? If unpaid taxes are subject to a valid delinquent tax contract, please indicate which tax years' charges are included in the contract.  Yes  No

If yes, list tax years \_\_\_\_\_

Comments:

\_\_\_\_\_  
 County treasurer (signature)

\_\_\_\_\_  
 Date

Delaware County Auditor  
 140 N Sandusky St  
 Delaware, OH 43015  
 740-833-2900