DTE FORM 25 (Revised 9/99) RC 4503.06

APPLICATION FOR MANUFACTURED AND MOBILE HOME TAX EXEMPTION AND REMISSION

				COUNTY NAME
				OFFICE USE ONLY
				County Application Number
				DTE Application Number
Date Received County Audit		Date Receiv DTE	ved by	
		GENERAL INS	FRUCTIONS	
cords.) Applications s	should not be filed	until the year following a	equisition of the prop	the home is located. (Make a copy for your your your your your your your yo
Both the County A	Auditor's Finding a ocedure to follow to	nd the Treasurer's Certifi obtain the Treasurer's Cer	cate on page 4 of this tificate.	s application must be completed. Ask y
Answer all questic	ons on the form. I estion each addition	f you need more room fo nal sheet is answering.	r any question, use ac	dditional sheets of paper to explain deta
	I	PLEASE TYPE OR F	PRINT CLEARLY	7.
the tax exempt list these preceding ta Applicant Name:	for the current t		d to have the taxes	e tax list and duplicate and placed o s and penalties thereon remitted fo
Notices concerning this application should be sent to:	Name (If dif	ferent than Applicant)		
	Address			
	City	State	Zip	Phone Number
1. Registration Numb (If more than 4, on an attached she	continue ",			
All homes mus	st be c)			

		COUNTY AUDITOR'S FI	NDING	
		Year of Application	(Year) \$ \$	
This application	covers property that i	s:		
	Current Previou Exemp	ısly	New Manufactured or Mobile Home	
Auditor's Recommend COMMENTS:	mendation: 🗆 (Grant	□ Deny □ Nor	ne
County A	Auditor (Signature)			Date
Forward two (2) co Box 530, Columbus		application to the Ohio Depar	tment of Taxation, Tax	Equalization Division, P.O.
		TREASURER'S CERTIF	TICATE	
		erly filled out and signed, th turned to the Treasurer's O j		ill have no jurisdiction to
(Notice to Treas	urer: The first paragra	aph of this certificate must alv	vays be complete).	
		CIAL ASSESSMENTS, PEN een paid in full to and including		REST levied and assessed
I further certify th		AXES, SPECIAL ASSESSN		AND INTEREST which
	TAX YEAR	TAXES (Including penalties) and interest)	SPECIAL ASSESSMENTS (Including penalties and interest)	(3)
		\$	\$	
		\$	\$	
		\$	\$	
	If additional y	vears are unpaid, please list	on an attached sheet.	
County	Freasurer (Signature)			Date

2. School District where Located:				

3.	Street Address or location of home:					
4.	Title to this home is in the name of:					
5.	If the title holder is different from the applicant please explain:					
6.	Title holder is (check one): a nonprofit corporation an unincorporated association an individual other	n/organization				
7.	Exact date title was acquired: 8. Title was acquired from: Please attach copy of the Certificate of Title.					
9.	Does the applicant have a lease or installment purchase agreement for this property? If yes, please attach a copy.	□ yes □ no				
10.	Amount paid by title holder for the home: \$					
11.	Exact date the exempt use began:					
12.	Under what section(s) in Chapter 5709 of the Ohio Revised Code is exemption sought?					
	O.R.C	O.R.C				
13.	How is this home now being used? Do not give conclusions such as charitable purp purpose. Be specific about what is being done in the home and who uses it. If the home there is an intent to use it later for an exempt purpose, describe the intended use and the document of the contract	is not currently being used, bu				
14.	a) Leased or rented to anyone else?	□ yes □ no				
	If yes, please attach copy of lease agreement.	П П .				
	b) Used for the operation of any business?	□ yes □ no				
	c) Used for agricultural purposes?	□ yes □ no				
	d) Used to produce any income other than donations?	☐ yes ☐ no				

NOTE: If the answer to any part of question 15 is "Yes," enclose all details on a separate sheet of paper. If money is received, submit profit and loss statements, income and expense data, balance sheets, or any other financial statements.

15.	Is anyone living or residing if yes, answer the following	any part of this home?		□ yes □ no		
	a) The person's name and p	osition:				
	b) The resident's duties (if any) in connection with this home:					
	c) The rent paid, or other fin					
16.	Is anyone using this home o	ther than the applicant?		□ yes □ no		
	If yes, please enclose a com	plete, detailed explanation	1			
17.	Does the applicant own prop	perty in this county which	is already exempt from taxation?	□ yes □ no		
18.	Home used for Charitable Purposes.					
			on for property used exclusively for y-Laws, IRS Determination Letter,			
19.	Home used for Senior Citizens' Residences.					
	If the purpose of the home is to provide a place of residence for senior citizens , submit all information required by section 5701.13 of the Ohio Revised Code.					
m	ust present a witness wh	o can accurately descr	on this application. If there is ribe the use of the home in que time and place of any hearing.			
	declare under penalty of perjelief, it is true, correct, and c	•	this application and, to the best of	my knowledge and		
Applicant or Representative						
signature						
		print name and title				
	address					
	city	state	zip			
	()					
	phone number					
	Date					