

Real Property Conveyance Fee Statement of Value and Receipt

If exempt by Ohio Revised Code section 319.54(G)(3), use form DTE 100(EX).

DTE 100
Rev. 1/14

RE

FOR COUNTY AUDITOR'S USE ONLY

| | | | | |
|--------------------|---------------|-------------------------|-------------------|------|
| Type of instrument | Tax list year | County number 11 | Tax. dist. number | Date |
|--------------------|---------------|-------------------------|-------------------|------|

Property located in _____ taxing district

Name on tax duplicate _____ Tax duplicate year _____

Acct. or permanent parcel no. _____ Map book _____ Page _____

Description _____ Platted Unplatted

Auditor's comments: Split New plat New improvements Partial value

C.A.U.V Building removed Other _____

Grantee or Representative Must Complete All Questions in This Section

Type or print all information. See instructions on reverse.

1. Grantor's name _____ Phone _____

2. Grantee's name _____ Phone _____

Grantee's address _____

3. Address of property _____

4. Tax billing address _____

5. Are there buildings on the land? Yes No If yes, check type:

1, 2 or 3 family dwelling Condominium Apartment: No. of units _____

Manufactured (mobile) home Farm buildings Other _____

If land is vacant, what is intended use? _____

6. Conditions of sale (check all that apply) Grantor is relative Part interest transfer Land contract

Trade Life estate Leased fee Leasehold Mineral rights reserved Gift

Grantor is mortgagee Other _____

7. a) New mortgage amount (if any).....\$ _____

b) Balance assumed (if any).....\$ _____

c) Cash (if any).....\$ _____

d) Total consideration (add lines 7a, 7b and 7c).....\$ _____

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 (7d minus 7e).....\$ _____

g) Name of mortgagee _____

h) Type of mortgage Conv. F.H.A. V.A. Other _____

i) If gift, in whole or part, estimated market value of real property.....\$ _____

8. Has the grantor indicated that this property is entitled to receive the senior citizen, disabled person or surviving spouse homestead exemption for the preceding or current tax year? Yes No If yes, complete form DTE 101.

9. Has the grantor indicated that this property qualified for current agricultural use valuation for the preceding or current tax year? Yes No If yes, complete form DTE 102.

10. Application for owner-occupancy (2.5% on qualified levies) 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 Jan. 1 of next year? Yes No If yes, is the property a multi-unit dwelling? Yes No

I declare under penalties of perjury that this statement has been examined by me and to the best of my knowledge and belief it is a true, correct and complete statement.

Signature of grantee or representative _____

Date _____

Number

No. of Parcels

DTE Code No.

Neigh. Code

No. of Acres

Land Value

Bldg. Value

Total Value

DTE Use Only

DTE Use Only

DTE Use Only

Consideration

DTE Use Only
Valid sale

1. Yes 2. No

Receipt Number

Receipt for Payment of Conveyance Fee

The conveyance fee required by Ohio Revised Code section (R.C.) 319.54(G)(3) and, if applicable, the fee required by R.C. 322, in the

total amount of \$ _____ has been paid by _____ and received (Date) _____ by the

Champaign County Auditor, Karen T. Bailey by _____, Deputy.