

# Homestead Exemption and Owner-Occupancy Reduction Certificate of Approval

County _____
Parcel or registration no. _____
Tax district _____
Application no. _____

To \_\_\_\_\_  
Name of applicant

I have fully investigated the facts and statements contained in your application for a homestead exemption under (check one box):

- Ohio Revised Code section (R.C.) 323.152 for the homestead exemption for qualifying senior citizens (age 65 and older), disabled persons or surviving spouses, for real property;
- R.C. 323.131(F) for the homestead exemption for qualifying 100% service-connected disabled veterans.
- R.C. 4503.065 for the homestead exemption for qualifying senior citizens (age 65 and older), disabled persons or surviving spouses, for manufactured or mobile homes;
- R.C. 323.159 for the homestead exemption for qualifying senior citizens (age 65 and older), disabled persons or surviving spouses occupying a unit in a housing cooperative.
- R.C. 323.152(B) for the owner-occupancy tax reduction for owner-occupied homes.

Based on that investigation, I find that the exemption requested is approved.

I hereby certify that I mailed a copy of this approval to the applicant on \_\_\_\_\_  
Date

\_\_\_\_\_  
County auditor

### Instructions to the county auditor:

1. The auditor shall send this form to the applicant by the first Monday in October, when the applicant's **original** application is first approved. For applications received or approved after that date, the auditor shall send the form upon approval of the application. Do not send this form for tax years following the tax year for which the exemption is first approved. The homestead exemption and the owner-occupancy reduction are presumed to continue indefinitely, until withdrawn by the applicant or denied by the auditor.

2. If the box for a housing cooperative is checked, the auditor shall also send this form, by the first Monday in October, to the nonprofit corporation that owns and operates the housing cooperative.