

**REAL PROPERTY CONVEYANCE FEE STATEMENT OF VALUE AND RECEIPT**

If exempt by O.R.C. 31954(F)(3), Use DTE Form 100 (EX)

**FOR COUNTY AUDITOR'S USE ONLY**

Type Instrument	Tax List Year	County Number	Tax Dist. Number	Date
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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 \_\_\_\_\_

Number
No. of Parcels
DTE Code No.
Neigh. Code
No. of Acres
Land Value
Bldg. Value
Total Value
DTE Use Only
DTE Use Only
Consideration
DTE Use Only Valid Sale
1 YES 2 NO

**GRANTEE OR REPRESENTATIVE MUST COMPLETE ALL QUESTIONS IN THIS SECTION  
TYPE OR PRINT ALL INFORMATION SEE INSTRUCTIONS ON NEXT PAGE**

- Grantor's Name \_\_\_\_\_ Phone: \_\_\_\_\_
- Grantee's Name \_\_\_\_\_ Phone: \_\_\_\_\_  
Grantee's Address \_\_\_\_\_
- Address of Property \_\_\_\_\_
- Tax Billing Address \_\_\_\_\_
- Are there buildings on the land?  YES  NO If yes check type:  
 1, 2 or 3 Family Dwlg.  Condominium  Apartment: No. of Units \_\_\_\_\_  
 Manufactured (mobile) home  Farm buildings  Other \_\_\_\_\_  
 If land is vacant, what is intended use? \_\_\_\_\_
- 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: \_\_\_\_\_
- 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 the real property..... \$ \_\_\_\_\_
- 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 DTE 101.
- 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 DTE Form 102.
- Application For 2 1/2% 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 grantees principal residence by January 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

**RECEIPT FOR PAYMENT OF CONVEYANCE FEE**

The conveyance fee required by section 319.54(F)(3) R.C., and , if applicable, the fee required by Chapter 322 R.C., in the total amount of \$ \_\_\_\_\_ has been paid by \_\_\_\_\_ and received by the \_\_\_\_\_ County Auditor.

\_\_\_\_\_  
COUNTY AUDITOR DATE \_\_\_\_\_