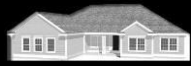




Kristen M.
Scalise CPA, CFE
Summit County Fiscal Officer
<http://FiscalOffice.summitoh.net>



HOMESTEAD EXEMPTION

If you are a homeowner who meets one of the requirements below, you may be eligible for a valuable tax reduction:

Standard Requirements for the exemptions below:

- Must own and live in home as primary residence January 1, of the year of application.
- Applicant and spouse (if applicable) must provide a current valid Ohio driver's license or State of Ohio ID card.

1.) Age 65 years or older.

- Must be age 65 by December 31 in year of application.
- 2023 MOAGI (Modified Ohio Adjusted Gross Income) of applicant and spouse must not exceed \$38,600 if applying in 2024.
- Applicant may back file for tax year 2023 if approved for current year. The deadline to back file is December 31st of the current year.
- 2022 MOAGI (Modified Ohio Adjusted Gross Income) must not exceed \$36,100 if eligible to backfile.

2.) Permanently and totally disabled, no age requirement.

- Must provide documentation of disability stating the date disability began. (must be deemed disabled on or before January 1st of the year of application).
- 2023 MOAGI (Modified Ohio Adjusted Gross Income) of applicant and spouse must not exceed \$38,600 if applying for 2024. (excluding any disability income)
- Applicant may backfile for tax year 2023 if approved for current year. The deadline to backfile is December 31st of the current year.
- 2022 MOAGI (Modified Ohio Adjusted Gross Income) must not exceed \$36,100 if eligible to backfile. (excluding any disability income)

3.) Military Veteran, 100% disability, no age or income requirement.

- Must provide documentation of disability by submitting a copy of the VA award letter assigning disability rating at 100% with onset date. (must be on or before January 1st year of application)
- OR VA award letter granting total disability rating for compensation based on individual unemployability with onset date. (must be on or before January 1st year of application)
- Must provide a copy of military discharge form DD214, displaying honorable discharge.

4.) Surviving spouse of a first responder, no age or income requirement

- Must provide confirmation letter from State pension fund or department or agency for which the that the public service officer was killed in the line of duty.
- Public service officer is a paramedic, emergency medical technician (including EMT-basic, EMT-I, and "first responder" classes), a paid or volunteer firefighter, or a police officer, sheriff, deputy sheriff, or other class of peace officer as defined for the purposes of the law governing the authority to arrest or issue citations.

Eligible homeowners receive an exemption on the first **\$26,200** of appraised value from taxation for a single family home. Eligible military veterans and surviving spouses of first responders receive an exemption on the first **\$52,300** of appraised value from taxation for a single family home.

Questions? 330-643-2661 • 330-643-2675 • 1-888-388-5613 • <http://FiscalOffice.summitoh.net>

Homestead Exemption Application for Disabled Veterans and Surviving Spouses

DTE 1051
Rev. 10/19

Real property and manufactured or mobile homes: File with the county auditor on or before December 31.

Please read the instructions on the back of this form before you complete it. The applicant must be 100% disabled by or be receiving 100% compensation for service-connected injuries on January 1 of the year for which the exemption is sought. See instructions for filing a late application on page 2 of this form.

Current application Late application for prior year

Type of home:

Single family dwelling Unit in a multi-unit dwelling Condominium Unit in a housing cooperative
 Manufactured or mobile home Land under a manufactured or mobile home

Applicant's name _____ Surviving spouse Yes No

Name of spouse _____

Home address _____

County in which home is located _____

Taxing district and parcel or registration number _____

from tax bill or available from county auditor

Were you discharged or released from active duty under honorable conditions? You will need to provide a copy of your Department of Defense Form 214 (DD214). Yes No

In order to be eligible for the enhanced disabled veteran homestead exemption, the form of ownership must be identified. Property that is owned by a corporation, partnership, limited liability company or other legal entity does not qualify for the exemption. Check the box that applies to this property.

The applicant is:

- an individual named on the deed a purchaser under a land installment contract
- a life tenant under a life estate a mortgagor (borrower) for an outstanding mortgage
- trustee of a trust with the right to live in the property
- the settlor, under a revocable or irrevocable inter vivos trust, holding title to a homestead occupied by the settlor as a right under the trust
- a stockholder in a qualified housing cooperative. See form DTE 105A – Supplement for additional information.
- other _____

I am applying as:

- A veteran with a total disability rating. Attach a copy of the veteran's DD214 and the award letter showing the disability rating of 100%.
- A veteran with a total disability rating for compensation based on individual unemployability. Attach a copy of the veteran's DD214, the award letter showing compensation at 100%, and a document showing the approval of the application for a determination of individual unemployability.

If the applicant or the applicant's spouse owns a second or vacation home, please provide the address and county below.

Address City State ZIP code County

I declare under penalty of perjury that (1) I occupied this property as my principal place of residence on January 1 of the year(s) for which I am requesting the homestead exemption, (2) I currently occupy this property as my principal place of residence, (3) I did not acquire this homestead from a relative or in-law, other than my spouse, for the purpose of qualifying for the homestead exemption, (4) the documentation presented regarding my disability and my discharge or release has been received from the Department of Veterans Affairs or its predecessor or successor agency, and (5) I have examined this application, and to the best of my knowledge and belief, this application is true, correct and complete.

Signature of applicant Date

Mailing address

Phone number E-mail address

Please read before you complete the application.

What is the Homestead Exemption for Disabled Veterans?

The homestead exemption provides a reduction in property taxes to qualified disabled veterans, or a surviving spouse, on the dwelling that is that individual's principal place of residence and up to one acre of land of which an eligible individual is an owner. The reduction is equal to the taxes that would otherwise be charged on up to \$50,000 of the market value of an eligible taxpayer's homestead.

What Your Signature Means: By signing the front of this form, you affirm under penalty of perjury that your statements on the form are true, accurate and complete to the best of your knowledge and belief and that the documentation you have presented is genuine and was received from the Department of Veterans Affairs, its predecessor or successor.

Qualifications for the Homestead Exemption for Real Property and Manufactured or Mobile Homes:

To receive the homestead exemption you must be a Qualified Disabled Veteran or a surviving spouse (see definitions at right), have been discharged or released under honorable conditions, and own and have occupied your home as your principal place of residence on January 1 of the year in which you file the application. A person only has one principal place of residence; your principal place of residence determines, among other things, where you are registered to vote and where you declare residency for income tax purposes. If the property is being purchased under a land contract, is owned by a life estate or by a trust, or the applicant is the mortgagor of the property, you may be required to provide copies of any contracts, trust agreements, mortgages or other documents that identify the applicant's eligible ownership interest in the home.

Definition of a Surviving Spouse: An eligible surviving spouse must (1) be the surviving spouse of a person who was receiving

the homestead exemption for the year in which the death occurred, (2) must have occupied the homestead at the time of the veteran's death and (3) must acquire ownership of the homestead or, in the case of a homestead that is a unit in a housing cooperative, continue to occupy the homestead. The surviving spouse remains eligible for the exemption until the year following the year in which the surviving spouse remarries.

Current Application: If you qualify for the homestead exemption for the first time this year (for real property) or for the first time next year (for manufactured or mobile homes), check the box for *Current Application* on the front of this form.

Late Application: If you also qualified for the homestead exemption for last year (for real property) or for this year (for manufactured or mobile homes) on the same property for which you are filing a current application, but you did not file a current application for that year, you may file a late application for the missed year by checking the late application box on the front of this form. You may only file a late application for the same property for which you are filing a current application.

Qualified Disabled Veteran: In order to qualify for the exemption you must be a veteran of the armed forces of the United States, including reserve components thereof, or of the National Guard, who has been discharged or released from active duty under honorable conditions, and who has received a total disability rating (100%) or a total disability rating for compensation (100%) based on individual unemployability, for a service-connected disability or combination of service-connected disabilities.

FOR COUNTY AUDITOR'S USE ONLY:

Taxing district and parcel or registration number _____ Auditor's application number _____

First year for homestead exemption _____

Date filed _____

Name on tax duplicate _____

Taxable value of homestead: Taxable land _____ Taxable bldg. _____ Taxable total _____

VA documentation verified Yes No Request Granted Denied

County auditor (or representative) _____ Date _____