Homestead Exemption Application for Surviving Spouses of Public Service Officers Killed in the Line of Duty

DTE 105K
Prescribed 01/21

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 the surviving spouse of a public service officer killed in the line of duty. The exemption first applies to the year in which the public service officer is killed in the line of duty. A homestead or manufactured or mobile home qualifies for this reduction in taxes under this exemption for the tax year in which the public service officer dies through the tax year in which the surviving spouse dies or remarries. 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 _____

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

The applicant's deceased spouse was a public service officer killed in the line of duty while serving as (check the box that applies):

☐ Peace officer (has the same meaning as in section 2935.01 of the Revised Code)

☐ Firefighter, whether paid or volunteer, of a lawfully constituted fire department

☐ First responder (has the same meaning as in division (A) of section 4765.01 of the Revised Code)

☐ EMT-basic (has the same meaning as in division (B) of section 4765.01 of the Revised Code)

☐ EMT-I (has the same meaning as in division (C) of section 4765.01 of the Revised Code)

☐ Paramedic (has the same meaning as in division (D) of section 4765.01 of the Revised Code)

☐ Equivalent position in another state (specify the position _____ and state____).

To be eligible for this 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 _____

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 status as the surviving spouse of a public service officer has been received from an employee or officer of the board of trustees of a retirement or pension fund in this state or another state or from the chief or other chief executive of the department, agency, or other employer for which the public service officer served when killed in the line of duty, 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