HOMESTEAD AND OWNER OCCUPIED TAX CREDIT VERIFICATION FORM

I/We have applied for the Ohio Homestead and/or Owner Occupied Credit in Hamilton County for the current tax year at the following location:

________________________________________________________________________
(Address)

There may exist an owner-occupancy related exemption or other benefit on the property that I and/or my spouse may own at the following location outside of Hamilton County:

_______________________________________________________________________________
(Address)

If homestead and/or owner-occupancy credits exist, I/we hereby request that the appropriate Assessor/Auditor to remove said exemptions or benefits effective for the ________ tax year.

Applicant: ____________________________     ________________________________
(Please print name)   (Please sign name)

Spouse:     ____________________________     ________________________________
(Please print name)   (Please sign name)

FOR OFFICIAL COUNTY USE ONLY:

___ The above referenced applicant(s) have cancelled the homestead and/or owner-occupancy related credits for tax year __________.
___ The property listed does not have owner-occupied related credits.

_________________________________    _____________________________   _____________________
Print name      Signature         Title

_________________________________   _____________________________    ______________________
County     Agency        Phone Number