DTE FORM 100
(REV 12/98)

REAL PROPERTY CONVEYANCE FEE STATEMENT OF VALUE AND RECEIPT

If exempt by O.R.C. 319.54(F)(3), Use DTE Form 100 (EX)

FOR COUNTY AUDITOR'S USE ONLY

Type Instrument	Tax List Year	County Number 10	Tax. Dist. Number	Date

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_____

GRANTEE OR REPRESENTATIVE MUST COMPLETE ALL QUESTIONS IN THIS SECTION

TYPE OR PRINT ALL INFORMATION **SEE INSTRUCTIONS ON REVERSE**

1. Grantor's Name _____ Phone: _____
2. Grantee's Name _____ Phone: _____
   Grantee's Address _____
3. Address of Property _____
4. Tax Billing Address _____
5. 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? _____
6. 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: _____
7. 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 . . . . . $_____
8. 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 Form 101.
9. 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.
10. 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 grantee's 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

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

Receipt Number

$_____ + $_____ = $_____

Conveyance Fee Transfer Fee Total

RECEIPT FOR PAYMENT OF CONVEYANCE FEE

Receipt Number

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 CARROLL County Auditor.

DATE _____ E. Leroy VanHorne COUNTY AUDITOR