

**LINDA L. FRALEY, Clermont County Auditor**

DTE FORM 100 **REAL PROPERTY CONVEYANCE FEE STATEMENT OF VALUE AND RECEIPT**  
(Rev 12/98)

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 <b>13</b>	Tax District 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 \_\_\_\_\_

**GRANTEE OR REPRESENTATIVE MUST COMPLETE ALL QUESTIONS IN THIS SECTION.  
MAKE SURE TO TYPE OR PRINT ALL INFORMATION (SEE INSTRUCTIONS ON NEXT PAGE)**

1. Grantor's Name _____	DTE Code No.
2. Grantee's Name _____	
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 Dwelling                      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    Conventional    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 101.	DTE Use Only
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 ½% 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	DTE Use Only
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	Consideration
_____ 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 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 **LINDA L. FRALEY, Clermont County Auditor**                      DATE \_\_\_\_\_