

(For Use by Currently Employed Designated Public Service Workers)

**AFFIDAVIT REQUESTING REMOVAL
FROM GENERAL TAX LIST PER O.R.C. §319.28(B)(1)**

STATE OF OHIO)
) ss:
COUNTY OF CLARK)

_____, being first duly sworn, says that they have personal
(Print First and Last Name)
knowledge of all the facts contained in this affidavit and that they are competent to testify to the
matters stated herein. Affiant further states as follows:

1. I am, or my spouse is, one of the following: a peace officer, parole officer, probation officer, bailiff, prosecuting attorney, assistant prosecuting attorney, correctional employee, county or multicounty corrections officer, community-based correctional facility employee, designated Ohio national guard member, protective services worker, youth services employee, firefighter, EMT, medical director or member of a cooperating physician advisory board of an emergency medical service organization, state board of pharmacy employee, investigator of the Bureau of Criminal Identification and Investigation, emergency service telecommunicator, forensic mental health provider, mental health evaluation provider, regional psychiatric hospital employee, judge, magistrate, or federal law enforcement officer

2. I hereby request, pursuant to Ohio Revised Code Section 319.28(B)(1), that the Clark County Auditor replace my name as property owner from the general tax list of real and public utility property for the property known as:

(Street Address, City, State, Zipcode)

Tax District/Parcel # _____.

3. I understand that my name, _____, will be replaced by my initials, as authorized by law, to _____, to indicate ownership of the above listed property.
(Print First and Last Initials)

Further, affiant sayeth naught.

Signature _____

Title _____

Sworn to before me and subscribed in my presence this _____ day of _____, 20____.

Notary Public _____

My Commission Expires _____

Instructions
Affidavit Requesting Removal
From General Tax List Per O.R.C 319.28(B)(1)

1. The Affidavit must be completed in its entirety, signed, and notarized. Please do not sign until you are in the presence of the Notary Public.
2. For job title, please indicate the qualifying profession that corresponds to your employment (law enforcement officer, firefighter, EMT, correctional facility employee, judge, etc.) - highlight or circle profession on form.
3. Spouses of qualifying employees are also permitted to submit an affidavit if the property is owned in their name; spouses must independently submit their own signed and notarized affidavit. For spouses of a qualifying employee, on the Title line at the bottom of Affidavit under Signature line please indicate in the job title: "Spouse to [insert qualifying profession here]."
4. The Affidavit will require a copy of the legal description of the property to be attached. A copy of the legal description can be obtained from the Clark County Recorder's office.
5. The Affidavit must be accompanied with the DTE 100 EX. Complete lines 1 & 2 (no phone number or Grantee address is required), sign and date form.
6. There will be a transfer fee to file the Affidavit with the Auditor's office. The transfer fee is .50 per parcel - cash/check.
7. The Auditor's office notifies the County Treasurer of any owner name changes; however, you will need to contact the County Recorder directly to ensure that their records are also updated.