FRANK RUSSO, CUYAHOGA COUNTY AUDITOR

REAL PROPERTY CONVEYANCE FEE STATEMENT OF VALUE AND RECEIPT PERMANENT PARCEL NO. DTE FORM 100 Revised 12/98 If exempt by O.R.C. 319.54 (F) (3), Use DTE Form 100 (Ex) FOR COUNTY AUDITOR'S USE ONLY Tax Dist. Date Type Tax List County 18 Number Instrument Year Number _____ Taxing District Property Located in Number _____ Tax Duplicate Year ___ Name on Tax Duplicate _ PERMANENT PARCEL NO. No. of Parcels ☐ Platted ☐ Unplatted Description SUBLOT NO: DTE Code No. AUDITOR'S COMMENTS:
Split New Plat New Improvements Partial Value ☐ C.A.U.V. ☐ Building Removed ☐ Other _____ Neigh. Code GRANTEE OR REPRESENTATIVE MUST COMPLETE ALL QUESTIONS IN THIS SECTION TYPE OR PRINT ALL INFORMATION **SEE INSTRUCTIONS ON REVERSE** 1. Grantor's Name Phone: No. of Acres 2. Grantee's Name Phone: 2a. Grantee's Address 3. Address of Property Land Value Tax Billing Address ____ 5. Are there buildings on the land? \(\superscript{YES}\) \(\superscript{I}\) NO If yes, check type: ☐ 1, 2, or 3 Family Dwlg. ☐ Condominium (Unit No. ___ Condo Name ____) ☐ Apartment: No. of Units ☐ Manufactured (mobile) home ☐ Farm buildings ☐ Other _____ Bldg. Value 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 Total Value ☐ Grantor is Mortgagee ☐ Other: _____ 7. a)New Mortgage Amount (If any)\$ b)Balance Assumed (If any).....\$ DTE Use Only c)Cash (If any) ______\$ d)Total Consideration (Add Lines 7a, 7b and 7e)\$ e)Portion, if any, of total consideration paid for items other than real property \$_______\$ DTE Use Only 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\$_ DTE Use Only 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? \(\subseteq\) YES \(\subseteq\) NO. If yes, complete DTE Form 101. Consideration 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 21/2% 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 DTE Use Only principal residence by January 1 of next year?

YES
NO. Valid Sale If yes, is the property a multi-unit dwelling? \square YES \square NO. 1. YES 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. DATE SIGNATURE OF GRANTEE or REPRESENTATIVE Receipt Number

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 _

Revised 12/98

FRANK RUSSO, CUYAHOGA COUNTY AUDITOR REAL PROPERTY CONVEYANCE FEE STATEMENT OF VALUE AND RECEIPT PERMANENT PARCEL NO. DTE FORM 100 If exempt by O.R.C. 319.54 (F) (3), Use DTE Form 100 (Ex) FOR COUNTY AUDITOR'S USE ONLY Tax Dist. Type Tax List County Date 18 Instrument Year Number Number _____ Taxing District Property Located in ____ Number Tax Duplicate Year _ Name on Tax Duplicate PERMANENT PARCEL NO. No. of Parcels ☐ Platted Unplatted Description SUBLOT NO: DTE Code No. AUDITOR'S COMMENTS: Split New Plat New Improvements Partial Value ☐ C.A.U.V. ☐ Building Removed ☐ Other Neigh. Code GRANTEE OR REPRESENTATIVE MUST COMPLETE ALL QUESTIONS IN THIS SECTION TYPE OR PRINT ALL INFORMATION **SEE INSTRUCTIONS ON REVERSE** 1. Grantor's Name Phone: No. of Acres 2. Grantee's Name Phone: ___ 2a. Grantee's Address Address of Property Land Value 4. Tax Billing Address 5. Are there buildings on the land? TYES INO If yes, check type: 1, 2, or 3 Family Dwlg. Condominium (Unit No. Condo Name Apartment: No. of Units ☐ Manufactured (mobile) home ☐ Farm buildings ☐ Other ☐ Bldg. Value 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 Total Value ☐ Grantor is Mortgagee ☐ Other: _____ 7. a)New Mortgage Amount (If any)\$ b)Balance Assumed (If any).....\$ DTE Use Only 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\$_ DTE Use Only 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\$ DTE Use Only 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? \(\subseteq \text{YES} \subseteq \text{NO. If yes,} \) complete DTE Form 101. Consideration 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 21/2% 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 DTE Use Only principal residence by January 1 of next year? \(\subseteq\) YES \(\subseteq\) NO. Valid Sale If yes, is the property a multi-unit dwelling? \square YES \square NO. 1. YES 2. 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.

RECEIPT FOR PAYMENT OF CONVEYANCE FEE

SIGNATURE OF GRANTEE or REPRESENTATIVE

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

DATE

FRANK RUSSO, CUYAHOGA COUNTY AUDITOR

| DTE FORM 100 Revised 12/98 | REAL PROPERTY CO | ONVEYANCE FEE Sempt by O.R.C. 319.54 (F) | STATEMENT OF | VALUE AND RE | CEIPT PERMANENT PARCEL NO. |
|--|---|--|-------------------------|--------------------|----------------------------|
| | II ex | empt by O.H.C. 319.54 (F) | (3), OSE DTE FORM T | 00 (EX) | |
| | | FOR COUNTY AUDI | TOR'S USE ONL | Υ | |
| Type Instrument | Tax List Year | County Number 1 | 8 Tax I | | Date |
| Property Located in | | | | Taxing Distric | ct Number |
| Name on Tax Dupli | cate | | Tax Duplicate | Year | |
| | PERMANENT PA | RCEL NO. | | | N. CD. I |
| Description | | | ☐ Platted | ☐ Unplatted | No. of Parcels |
| | | | | | DTE Code No. |
| AUDITOR'S COM | MENTS: \square Split \square New \square C.A.U.V. \square | Plat New Improve Building Removed | | | |
| GRANTEE OR REPRESENTATIVE MUST COMPLETE ALL QUESTIONS IN THIS SECTION | | | | | Neigh. Code |
| | NT ALL INFORMATION | | | CTIONS ON REVI | <u>ERSE</u> |
| | ne | | | | No. of Acres |
| | nelress | | Phone: | | |
| 3. Address of Pro | operty | | | | |
| 4. Tax Billing Address | | | | | Land Value |
| 5. Are there buildings on the land? TYES INO If yes, check type: | | | | | |
| ☐ 1, 2, or 3 Family Dwlg. ☐ Condominium (Unit No Condo Name) ☐ Apartment: No. of Units | | | | | |
| ☐ Manufactured (mobile) home ☐ Farm buildings ☐ Other | | | | | Bldg. Value |
| If land is vacant, what is intended use? | | | | | |
| 6. Conditions of Sale (Check all that apply): Grantor is Relative Part Interest Transfer Land Contract | | | | | ict |
| ☐ Trade ☐ Life Estate ☐ Leased Fee ☐ Leasehold ☐ Mineral Rights Reserved ☐ Gift ☐ Grantor is Mortgagee ☐ Other: | | | | | Total Value |
| | | | | | |
| 7. a)New Mortg | age 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 | | | | | |
| | rtgage 🗌 Conv. 🔲 F.H.A. | | | _ | |
| | nole or part, estimated market | | | | DTE Use Only |
| | or indicated that this property i | | | | |
| | ise homestead exemption for t | he preceding or current | tax year? \square YES | S □ NO. If yes, | |
| complete DTE | | malified for aument a mi | inulared or a colored | C 41 1' | Consideration |
| 9. Has the grantor indicated that this property qualified for current agricultural use valuation for the preceding or current tax year? NO. If yes, complete DTE Form 102. | | | | | |
| | | | | its the owner from | |
| 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 | | | | | DTE Use Only |
| principal residence by January 1 of next year? YES NO. | | | | | Valid Sale |
| If yes, is the property a multi-unit dwelling? YES NO. | | | | | |
| | ER PENALTIES OF PERJUFY KNOWLEDGE AND BELIE | | | | ND TO 1. YES 2. NO |
| DATE | | OLONIATIO | E OF ORALITEE | DEDDECT | |
| DATE | | SIGNATUR | E OF GRANIEE | or REPRESENTA | |
| | | | | | Receipt Number |

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