

## 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

.50

Type Instrument	GW	Tax List Year	2017	County Number	16	Tax Dist Number	1100	Date	2-12-18
Property Located in <u>Lafayette - RSG</u> Taxing District								Number	80
Name on Tax Duplicate <u>Israel Mildred</u> Tax Duplicate Year <u>2017</u>								No. of Parcels	1
Acct. or Permanent Parcel No. <u>018-1019-00</u> Map Book _____ Page _____								DTE Code No.	510
Description: <u>In Lot 25</u> <input type="checkbox"/> Platted <input type="checkbox"/> Unplatted								Neigh. Code	00616
AUDITOR'S COMMENTS: <input type="checkbox"/> Split <input type="checkbox"/> New Plat <input type="checkbox"/> New Improvements <input type="checkbox"/> Partial Value								No. of Acres	0.3444
<input type="checkbox"/> C.A.U.V. <input type="checkbox"/> Building Removed <input type="checkbox"/> Other _____								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	

GRANTEE OR REPRESENTATIVE MUST COMPLETE ALL QUESTIONS IN THIS SECTION  
TYPE OR PRINT ALL INFORMATION SEE INSTRUCTIONS ON NEXT PAGE

1. Grantor's Name Mildred P Israel

2. Grantee's Name David L Israel

Grantee's Address 644 Chestnut Street, West Lafayette, OH 43845

3. Address of Property 644 Chestnut Street, West Lafayette, OH 43845

4. Tax Billing Address 644 Chestnut Street, West Lafayette, OH 43845

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: outbuildings/garages \_\_\_\_\_

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) ..... \$ 105,000.00  
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) ..... \$ 105,000.00  
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 [Signature] DATE 2/9/18

## 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 \$ 420.00 has been paid by Rep/Grantor and received by the Cosherton County Auditor

Christine R. Sycks COUNTY AUDITOR

DATE 2-12-18

Ownership: ISRAEL MALORIED P 644 CHESTNUT ST AG LAND USE: N  
Owner: 844 CHESTNUT ST LUSE: 510 Liv Unit: 1 Class: R  
WEST LAFAYETTE OH 43845 Nblnd: 00616  
Zoning: Field Review Flag:  
Tax Dist: LAFAYETTE TWP-RDGLS

Notes: R-Lot 25 .344A 150 X  
100  
ANSE WELKERS FIRST  
Legal Desc

Land Description	L#	Type	Cd	Ft/Act	Size	Base	Incr	Decr	Int'l 2	Adj	Ad/Rate	Value
1 F 1 100 100.0 x 150	1	F	1	100	100.0 x 150	175	90	175			175	19,430



Tot Parcel Size: 0.3444 Deed: .344

Date	Number	Building Permit	Amount	Purpose	O/C	Sale Date	Type	Price	LT #	Valid	Misc Impr:
06/05/96	2					06/05/96	2		4	4	Gross Impr: 0
04/03/96	2					04/03/96	2		4	4	Gross Impr: 0

Enter: Date: 01/06/14 Enter Rst: Info Data Mailer Spoke With: Owner Appr: WT

Improvement Description:

Story Ht: 1 Plumb Upbr: Heating: air conditioner Prefab Fireplace: Funct % Gd: 0  
Attic: none Dare Remod: 5 Phys Cond: Add Sty Stack(PF): Econ % Gd: 0  
Cnstr: vinyl/metal Tot Rooms: 5 Int Ext Cnd: same Bsmt Gar # Cars: 0  
Style: ranch Bedrooms: 3 Storm Flood: Misc Desc 1: Econ Desc: 0  
Yr Blt: 1969 Fam Rooms: 0 Unfin Area: Misc Desc 2: Over Dear Tbl: 0  
Etr Year: Full Baths: 1 Rec Room: Pct Cmpbt: C&D Descrip: 0  
Yr Remod: Half Baths: 0 Fin Bsmt Area: Condo Level: Condo Type: 0  
Rem Ktr: Extra Fix: 2 WBFP Stacks: 0 CDU: Condo View: 0  
Rem Bath: no Foundations: 0 Market Adj: Condo View: 0  
Elec Upgr: Bsmt: full Add Sty Stack(WB):

L#	Low	1st	2nd	3rd	Description	Area	RCNLD
A 0						1,388	70,540
B 1					Mas Sloop/Terrace	36	420
D C 2					F Gar Frame Garage	676	8,850
N							
S							

Card L# Code Yr Blt W x L Area Gd Units Mod Cd Cond %Gd RCNLD

Value Summary	Prior	Cost	Market	Current Appr
Land	19,430	19,430	0	19,430
Bldg	79,840	79,840	0	79,840
Total	99,270	99,270	0	99,270
Rev Code: 1 - Cost Approach	Land/Bldg Fact	1.00 / 1.00		

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