

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 <u>WO</u>	Tax List Year <u>2017</u>	County Number <u>16</u>	Tax. Dist. Number <u>3010</u>	Date <u>2-28-18</u>
Property Located in <u>Coshocton Corp - CSB</u>				Number <u>121</u>
Name on Tax Duplicate <u>Collins Patrick</u>				No. of Parcels <u>1</u>
Acct. or Permanent Parcel No. <u>043-00002895-00</u> Map Book _____ Page _____				DTE Code No. <u>510</u>
Description: <u>In Lot 2375</u> <input type="checkbox"/> Platted <input type="checkbox"/> Unplatted				Neigh. Code <u>00115</u>
AUDITOR'S COMMENTS: <input type="checkbox"/> Split <input type="checkbox"/> New Plat <input type="checkbox"/> New Improvements <input type="checkbox"/> Partial Value <input type="checkbox"/> C.A.U.V. <input type="checkbox"/> Building Removed <input type="checkbox"/> Other _____				No. of Acres <u>0.114</u>
GRANTEE OR REPRESENTATIVE MUST COMPLETE ALL QUESTIONS IN THIS SECTION TYPE OR PRINT ALL INFORMATION SEE INSTRUCTIONS ON NEXT PAGE				Land Value
1. Grantor's Name <u>Patrick J. Collins Declaration Trust</u> Phone: _____				Bldg. Value
2. Grantee's Name <u>Suzanne S. Clark</u> Phone: _____				Total Value
Grantee's Address <u>956 Kensington Road, Coshocton, Ohio 43812</u>				DTE Use Only
3. Address of Property <u>1320 Denman Avenue, Coshocton, Ohio 43812</u>				DTE Use Only
4. Tax Billing Address <u>956 Kensington Road, Coshocton, Ohio 43812</u>				DTE Use Only
5. Are there buildings on the land? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If yes check type: <input checked="" type="checkbox"/> 1, 2 or 3 Family Dwlg. <input type="checkbox"/> Condominium <input type="checkbox"/> Apartment No. of Units _____ <input type="checkbox"/> Manufactured (mobile) home <input type="checkbox"/> Farm buildings <input type="checkbox"/> Other: _____				Consideration
If land is vacant, what is intended use? _____				DTE Use Only Valid Sale 1. YES 2. NO
6. Conditions of Sale (Check all that apply): <input type="checkbox"/> Grantor is Relative <input type="checkbox"/> Part Interest Transfer <input type="checkbox"/> Land Contract <input type="checkbox"/> Trade <input type="checkbox"/> Life Estate <input type="checkbox"/> Leased Fee <input type="checkbox"/> Leasehold <input type="checkbox"/> Mineral Rights Reserved <input type="checkbox"/> Gift <input type="checkbox"/> Grantor is Mortgagee <input type="checkbox"/> 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).....\$ <u>85,000.00</u> 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 <input type="checkbox"/> Conv. <input type="checkbox"/> F.H.A. <input type="checkbox"/> V.A. <input type="checkbox"/> 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? <input checked="" type="checkbox"/> YES <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. If yes, is the property a multi-unit dwelling? <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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. <u>Suzanne S. Clark</u> <u>2/23/18</u> SIGNATURE of GRANTEE or REPRESENTATIVE DATE				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 \$ 340.00 has been paid by Rep/Grantor and received by the Coshocton County AuditorChristine R. Sykes COUNTY AUDITORDATE 2-28-18

Owner/ship
COLLINS PATRICK J DECLARATION OF TR
1320 DENMAN AVENUE
COSHOCTON OH 43812

General Information
LUSE: 510 AGLAND USE: N
LIV Unit: 1 Class: R
Zoning: Nbrhd: 00115
Field Review Flag:
Tax Dist: COSHOCTON CORP - CSD

Notes
N-Lot 2375 W PT 54 X 46
2374 W PT 54 X 46
VOL 311/706

Land Description

L#	Type	Cd	Flact	Size	Base	Incre	Decre	Inft 1	2	Adj	AdjRate	Value
1	F	1	54	54.0 x 92	200	100	200				200	9,500

Tot Parcel Size: 0.114 Deed: .114

Building Permit

Date	Number	Amount	Purpose	O/C	Sale Date	Type	Price	LT #	Valid	Misc Impr:	Miscellaneous
					10/22/15	2			4	0	0
					10/20/15	2			4		
					05/01/88	2	42,500		0		

Enter: Date: 11/29/07 Entr Rslt: Info At Door Spoke With: Owner Appr: GH

Improvement Description:

Story Ht: 1 Plumb Upbr: Heating: at condition: Prefab Fireplace: Funct % Gdt: Add Sty Stack(P/F):
Attk: full-in Dare Remod: Phys Cond: same Add Sty Stack(P/F):
Cnstr: vinyl/metal Tot Rooms: 8 Int Ext Cnd: Storm Flood: Bernt Gar # Cars: 1 Econ % Gdt:
Style: cape cod Yr Btt: 1947 Storm Rooms: 4 Unfin Area: Misc Desc 1: Misc Desc 2: Over Dear Tbt: C&D Descrip: Condo Level: Condo Type: Condo View:
Yr Remod: Full Baths: 1 Rec Room: 298 Pet Cmpit: 100 C&D Descrip: 0
Yr Remod: Half Baths: 0 Fin. Bernt Area: WBEP Stacks: 0 C: GD
Ram Kit: Extra Fix: 4 Foundation: 0 Openings: 0 Market Adj:
Ram Bath: no Bernt: full Add Sty Stack(WB):
Bec Upgr:

