OFFICE USE ONLY			<u>_</u>			
Applicant Name		Type of Applic	cation ☐ Owner Occupied ☐ Relative/Residentia	Owner Occupied  Relative/Residential		
Assessment Year		<del></del>	☐ Relative/Agricultur			
Assessor or Representative's Signature	Determination	n				
			<b>□</b> Denied			
Date						
Homestead Application						
Please read the instructions for important informat occupant or occupants should complete this applic occupying relative and their spouse (if applicable).				ing		
Section 1: Homestead Property Information	on					
Address of Homestead						
City	State	ZIP Code	County			
Date Purchased	Date Occupied		1			
Property ID Number (Found on the Property Tax Sta	tement)					
Is the property owned by a trust? Yes N	o If yes, attach documents s	showing the ownership	interests of the trust.			
Are there multiple owners of the property (not inclu			rovide the number of owners.	_		
Section 2: Occupant Information						
Occupant First Name and Middle Initial	Occupant Last Name		Social Security Number/ITIN			
Phone Number	Email Address	Email Address				
Occupant's Mailing Address (if different than homes	tead property)					
City	State	ZIP Code				
Are you listed as an owner on the deed?	Yes No If ye	Yes No If yes, do not complete section 4, Relative Homestead.				
Are you a Minnesota resident?	Yes No					
Marital Status:	Single Married	Single Married Divorced Legally Separated Widowed				
Your Previous Address			Date Vacated			
City	State	ZIP Code	County			
	Yes No If	yes, what happened w	rith your previous homestead			

(Rev. 7/21) Continued

(sold, rented, etc.):

Section 3: Spouse Information					
Spouse of Occupant First Name and Middle Initial	Spouse of Occupant Last Name So		Social Security Number/ITIN		
Phone Number	Email Address				
Does the spouse occupy the property listed in Section 1?  Yes (List their previous address below)  No		ddress below)			
Address			Date Vacated		
City	State	ZIP Code	County		
Complete sections 2a and 3a ONLY if there are other occ	cupying owners not lis	ted in section 2 or 3. If not	, skip these sections.		
Section 2a: Additional Occupant Information					
Occupant First Name and Middle Initial	Occupant Last Name		Social Security Number/ITIN		
Phone Number	Email Address				
Occupant's Mailing Address (if different than homestead	property)				
City	State	ZIP Code			
Are you listed as an owner on the deed?	Yes No If yes, do not complete section 4, Relative Homestead.				
Are you a Minnesota resident?	Yes No				
Marital Status:	Single Marri		gally Separated Widowed		
Your Previous Address			Date Vacated		
City	State	ZIP Code	County		
Did you claim homestead at your previous address?	Yes No If yes, what happened with your previous homestead (sold, rented, etc.):				
Section 3a: Additional Spouse Information					
Spouse of Occupant First Name and Middle Initial	Spouse of Occupant Last Name		Social Security Number/ITIN		
Phone Number	Email Address	<u> </u>			
Does the spouse occupy the property listed in Section 1?  Yes (List their previous address below)  No		ddress below)			
Address			Date Vacated		
City	State	ZIP Code	County		

Section 4: Relative Homestead				
Complete this section ONLY if you are a qualifying please attach their information separately.	relative applying for	homestead. Otherwise, s	cip to Section 5. If there are multiple	owners,
Property Owner First Name and Middle Initial	Property Owne	er Last Name	Your Relationship to Property	Owner
Property Owner Mailing Address			I	
City	State	ZIP Code	County	
Phone Number	Email Address	Email Address		
Is the property owner a Minnesota resident?  Yes No				
Section 5: Signature				
I certify that the above information is true and confalse information in order to avoid or reduce their to			·	nyone givin
This application must be signed by the occupant an	d their spouse (if app	licable) and returned to th	e assessor.	
Signature of Occupant			Date	
Signature of Occupant's Spouse (If Applicable)		D	Date	
Signature of Other Occupant (If Applicable)			ate	
Signature of Other Occupant's Spouse (If Applicable)		D	ate	

Complete entire application and mail along with all required attachments to your assessor.

## **Form CR-H Instructions**

## Who is Eligible for Homestead?

If you own and occupy your own property, you may be eligible to receive homestead. You must own the property and occupy it as your primary residence no later than December 31 of the current year to receive homestead for taxes payable next year. For information about the benefits of homestead, please contact your assessor.

## **How and When to Apply**

Complete and mail the application to your assessor within 30 days of establishing homestead, no later than December 31 to be eligible for homestead in the next tax year.

For manufactured homes, if you do not own the land the home is on, you must submit the application by May 29 to be eligible for homestead in the current tax year.

You do not have to reapply for each year. The assessor may ask for an updated application at any time.

Each applicant who occupies the property must provide a Social Security Number and sign the form. Spouses of the applicants must also provide their Social Security Number, even if they do not occupy the property.

## What if My Property is Held Under a Trust?

If the property is owned by a trust, the grantor of the trust is considered the owner when completing this application. The assessor may ask for additional information, including:

- · Name and type of trust
- · Grantors of the trust
- Signatures of the grantors and date of those signatures

### **Required Attachments**

If any owners or owners' spouses do not occupy the property, you must provide their names and addresses to the assessor.

The spouse of the occupant must provide their Social Security Number, even if they do not occupy the property.

If there are more than two qualifying occupants, attach another application with the occupant and occupant's spouse (if applicable) sections completed..

# Individual Tax Identification Number (ITIN)/Social Security Number (SSN)

An ITIN can only be used in situations where one spouse has a Social Security number and the other spouse does not. ITINs are not an acceptable alternative in any other case.

We will not disclose Social Security number(s) you provide on this form to the public, but we may share among government officials for tax collection and administration purposes.

## What is a Qualifying Relative?

Qualifying relatives for both agricultural and residential homestead include: parent, stepparent, child, stepchild, grandparent, grandchild, brother, sister, uncle, aunt, nephew, or niece of the owner, by blood or marriage.

#### Use of Information

The information on this form is required by Minnesota Statutes, section 273.124 to properly identify you and determine if you qualify for homestead. Your Social Security number is required. If you do not provide the required information, your application will be denied. If you provide your Social Security number thereafter, the effective date of the homestead classification may be delayed. Your Social Security number is considered private data for purposes of establishing homestead.

#### **Penalties**

Making false statements on this application is against the law. Minnesota Statutes, section 609.41, states that anyone giving false information in order to avoid or reduce their tax obligations is subject to a fine of up to \$3,000 and/or up to one year in prison.

If you falsely claim homestead, you may be assessed a penalty equal to in the amount of the additional tax that would have applied to your property if it had not been considered homestead.

#### **Questions?**

Contact the assessor's office for assistance.