

# Homeowner's Principal Residence Exemption Affidavit

Issued under authority of P.A. 105 of 2003.

Completion of this affidavit constitutes a claim for a Homeowner's Principal Residence Exemption when filed with the local assessor of the city or township where the property is located. Filing this affidavit invalidates any previous Homeowner's Principal Residence Exemption the homeowner may have claimed. A Request to Rescind Homeowner's Principal Residence Exemption, Form 2602 must be filed with the local assessor for any previous claims.

Print or type in blue or black ink. Use a separate form for each property number.

Property Information		
▶ 1. Property Tax Identification Number		▶ 2. ZIP Code
▶ 3. Street Address of Property	4. Name of Township or City <input type="checkbox"/> Township <input type="checkbox"/> City	5. County

6. Date the property in line 1, above, became your principal residence ..... ▶ 6. \_\_\_\_\_  
 The property in line 1 above is my:      ▶ 6a.  Principal residence      Month      Day      Year  
    ▶ 6b.  Residential vacant contiguous or adjacent lot

▶ 7. Name of Owner (First, Middle, Last)	▶ 8. Owner's Social Security Number
▶ 9. Name of Co-Owner (First, Middle, Last)	▶ 10. Co-Owner's Social Security Number

11. Property owner's daytime telephone number ..... 11. \_\_\_\_\_

12. If this parcel has more than one home on it, or if you own and live in one unit of a multiple-unit dwelling (or a multi-purpose property) give the percentage of the entire property that your unit (your principal residence) occupies. Your exemption will be based on this percentage ..... ▶ 12. \_\_\_\_\_ %

13. Have you claimed a principal residence exemption for another Michigan principal residence?      13.       Yes       No

14. If yes, have you rescinded that principal residence exemption? .....      14.       Yes       No

15. Do you or your spouse claim an exemption, credit or deduction on property located in another state? .....      15.       Yes       No

16. Have you or your spouse filed a tax return as a resident of another state? .....      16.       Yes       No

Certification			
<i>I certify under penalty of perjury the information contained on this document is true and correct to the best of my knowledge.</i>			
17. Owner's Signature	Date	17a. Co-Owner's Signature	Date
17b. Mailing Address, if Different than Property Address Above			
18. Closing Agent or Preparer's Name and Mailing Address			

Local Government Use Only -- Do Not Write Below This Line	
19. Was an exemption in place prior to this affidavit being filed? .....	19. _____
20. What is the first year this exemption will be posted to the tax rolls? .....	▶ 20. _____
21. Indicate property classification .....	21. _____