

OFFICE USE ONLY	
Applicant Name	Type of Application: <input type="checkbox"/> Owner Occupied <input type="checkbox"/> Relative/Residential <input type="checkbox"/> Relative/Agricultural
Assessment Year	
Assessor or Representative Signature	
Date:	Determination: <input type="checkbox"/> Approved <input type="checkbox"/> Denied

Homestead Application

Applications are due to your county assessor's office by December 15. For manufactured homes assessed as personal property, applications are due May 29. Please read all instructions before completing this application. **NOTE: Each applicant must complete a separate form to apply for homestead (see Section 2 for married couple applicant instructions).**

SECTION 1: PROPERTY INFORMATION

This section MUST be completed. Please provide the following information on the property you are claiming homestead.

Address of Property

Property ID Number (Found on the Property Tax Statement)

City	State	Zip Code	County
Date Purchased		Date Occupancy Established by Applicant(s)	

SECTION 2: OCCUPANT INFORMATION

This section must be completed by EACH individual or married couple applying for homestead. By completing this section, you certify you (and your spouse if applicable) are a Minnesota Resident, and occupy the property described above as your primary place of residence. You also certify that the information you provide is true and correct to the best of your knowledge.

Occupant First Name and Initial	Occupant Last Name	Social Security Number	
Are you listed as an owner on the deed? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Legally Separated			
If married, does your spouse occupy the property? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Previous Address			
City	State	Zip Code	County
Date Vacated	Check One: Did you claim homestead at your previous address? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Occupant's Spouse (First Name and Initial)	Occupant's Spouse Last Name	Social Security Number/ITIN	
Previous Address			
City	State	Zip Code	County
Date Vacated	Check One: Did you claim homestead at your previous address? <input type="checkbox"/> Yes <input type="checkbox"/> No		

SECTION 3: HOMESTEAD APPLICATION

Complete Section 3A to apply for residential homestead OR Section 3B to apply for agricultural homestead. NOTE: If you are not sure whether you qualify for agricultural homestead, please contact your county assessor.

SECTION 3A: RESIDENTIAL HOMESTEAD APPLICATION OR SECTION 3B: AGRICULTURAL HOMESTEAD APPLICATION

Are you claiming residential homestead? <input type="checkbox"/> Yes <input type="checkbox"/> No Is your spouse claiming residential homestead at this property as well? (If applicable) <input type="checkbox"/> Yes <input type="checkbox"/> No Are you listed as an owner on the deed? <input type="checkbox"/> Yes <input type="checkbox"/> No If you are not an owner, are you a qualifying relative of an owner? ¹ <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you claiming agricultural homestead? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, do you or your spouse claim another Agricultural homestead? <input type="checkbox"/> Yes <input type="checkbox"/> No Is your spouse claiming agricultural homestead at this property as well? (If applicable) <input type="checkbox"/> Yes <input type="checkbox"/> No If you are not an owner, are you qualifying relative of an owner? ² <input type="checkbox"/> Yes <input type="checkbox"/> No If you are a qualifying relative, are there any other agricultural relative homesteads in Minnesota for your family? <input type="checkbox"/> Yes <input type="checkbox"/> No
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SECTION 4: RELATIVE HOMESTEAD APPLICATION

Complete this section ONLY if you are a qualifying relative applying for homestead. Otherwise, skip to Section 5.

Property Owner First Name and Initial	Property Owner Last Name	Relationship to Applicant	
Property Owner Mailing Address			
City	State	Zip Code	County
Is the property owner a Minnesota Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No			

SECTION 5: SIGNATURE

Sign Here (Applicant)

I certify that the above information is true and correct to the best of my knowledge. 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. This application must be signed by **all owners who occupy the property** or **by the qualifying relative** and returned to the county assessor to receive homestead treatment.

Signature of Applicant	Date	Daytime Phone
Evening Phone	Email	
Signature of Applicant's Spouse (If Applicable)	Date	Daytime Phone
Evening Phone	Email	
Signature of Other Owner/s (If Applicable)	Date	Daytime Phone
Evening Phone	Email	
Signature of Other Owner/s (If Applicable)	Date	Daytime Phone
Evening Phone	Email	

Please complete both sides and mail this completed application and all required attachments to your assessor.

¹Qualifying relative for residential homesteads include: parent, stepparent, child, stepchild, grandparent, grandchild, brother, sister, uncle, aunt, nephew, or niece of the owner, by blood or marriage.
²Qualifying relative for agricultural homesteads include: grandchild, child, sibling, or parent of the owner of the agricultural property or the spouse of the owner.

ADDITIONAL QUESTIONS THAT MUST BE ANSWERED:

1. Do you have a Minnesota Driver's License?

YES _____ NO _____ WILL GET _____

If you answer no to this question, please explain. If yes, provide address shown on license.

2. Are your cars registered in Minnesota?

YES _____ NO _____ WILL GET _____

If you answer no to this question, please explain.

3. Do you file Minnesota Income Tax?

YES _____ NO _____ NOT REQUIRED _____

If you answer no to this question, please explain.

4. Do your children, if any, attend school in Minnesota?

YES _____ NO _____ N/A _____

5. Are you registered to vote in Minnesota?

YES _____ NO _____

If you are registered to vote, you must vote in the city/township where you claim homestead.

6. Will any part of this property be rented to others?

YES _____ NO _____

If you answer yes to this question, please explain.

7. Do you have additional agricultural property in either Clay County or the following surrounding counties: Becker, Mahnommen, Norman, Ottertail or Wilkin?

YES _____ NO _____

If you answer yes to this question, please circle counties affected.

Please mail this completed application and all required attachments to:

Clay County Assessor
807 11th Street North
Moorhead, MN 56560

Form CR-H Instructions

Who is eligible for Homestead?

If you own and occupy your own property, you may be eligible for homestead treatment. Classification as a residential or agricultural homestead may make your property eligible for a reduced classification rate and/or a reduced taxable value, or may make you eligible for special program enrollment and the Property Tax Refund program.

You must have owned the property and occupied it as your primary residence by no later than December 1 of the current year to be eligible for homestead for taxes payable next year.

How to Apply

Complete the entire application fully and legibly. Mail the application to your county assessor within 30 days of establishing homestead, but no later than December 15 of the current year to be eligible for homestead in the next payable tax year.

Applications do not need to be submitted annually in order to continue receiving homestead; however, the assessor may ask for an updated application at any time.

All owner-occupants and spouses who occupy the property must provide Social Security numbers and sign the form.

Required Attachments

If any owners do not occupy the property, you must furnish the assessor with the names and addresses of the owners.

If any spouses do not occupy the property, you must furnish the assessor with the names and addresses of the spouses.

If more than two owners occupy the property, please attach another form with the Owner/Occupant Information section completed.

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.

The Social Security number(s) you provide on this form will not be disclosed to the public, but may be shared among government officials for tax collection and administration purposes.

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, penalties may also be assessed in the amount of the tax that would have applied to your property had it not been considered homestead.

Additional Resources

Your County Assessor's Office should be able to assist you with properly filling out this form. A fact sheet may be found on the Department of Revenue's website at www.revenue.state.mn.us.

Questions?

Contact your County Assessor's Office for assistance.