eant Name		Type of Application	Relative/Resider
sment Year		_	☐ Relative/Agricult
sor or Representative's Signature	Determination		☐ Approved ☐ Denied
		_	
		_	
nestead Application Itions are due to your county assessor's office by D	December 15. Please re	ead all instructions bef	ore completing this application
Each applicant must complete a separate form to a	apply for homestead (se	ee Section 2 for marrie	ed couple applicant instruction
This section MUST be completed. Please provide the	he following informatio	n on the property you	are claiming homestead.
Address of Property			
Property ID Number (Found on the Property Tax State	ement)		
Dity	State	Zip Code	County
Date Purchased	Date Occupancy Est	 ablished by Applicant(s)
		,	,
			ibed above as your primary p
residence. You also certify that the information you		rrect to the best of you	ibed above as your primary p
residence. You also certify that the information you Occupant First Name and Initial	ı provide is true and co	rrect to the best of you	ibed above as your primary pur knowledge.
Decupant First Name and Initial Are you listed as an owner on the deed?	Occupant Last Name	e	ibed above as your primary pur knowledge.
Dccupant First Name and Initial Are you listed as an owner on the deed? Marital Status:	Occupant Last Name	e	ibed above as your primary plur knowledge. Social Security Number
esidence. You also certify that the information you Decupant First Name and Initial Are you listed as an owner on the deed? Marital Status: f married, does your spouse occupy the property?	Occupant Last Name Yes No Single Mar	e	Social Security Number
Decupant First Name and Initial Are you listed as an owner on the deed? Marital Status: f married, does your spouse occupy the property? Previous Address	Occupant Last Name Yes No Single Mar	e	ibed above as your primary plur knowledge. Social Security Number
Decupant First Name and Initial Are you listed as an owner on the deed? Marital Status: f married, does your spouse occupy the property? Previous Address City	yes No Single Mar Yes No State	ried Divorced Zip Code	ibed above as your primary plur knowledge. Social Security Number Legally Separated County
Decupant First Name and Initial Are you listed as an owner on the deed? Marital Status: f married, does your spouse occupy the property? Previous Address Dity	yes No Single Mar Yes No State	ried Divorced	ibed above as your primary plur knowledge. Social Security Number Legally Separated County
Decupant First Name and Initial Are you listed as an owner on the deed? Marital Status: f married, does your spouse occupy the property? Previous Address Dity Date Vacated	yes No Single Mar Yes No State Check One: Did you	ried Divorced Zip Code claim homestead at yo	ibed above as your primary plur knowledge. Social Security Number Legally Separated County ur previous address?
Decupant First Name and Initial Are you listed as an owner on the deed? Marital Status: f married, does your spouse occupy the property? Previous Address City Date Vacated Decupant's Spouse First Name and Initial	yes No State Check One: Did you Yes No	ried Divorced Zip Code claim homestead at yo	ibed above as your primary plur knowledge. Social Security Number Legally Separated County
City Decupant's Spouse First Name and Initial Decupant's Spouse First Name and Initial Decupant's Spouse First Name and Initial	yes No State Check One: Did you Yes No	ried Divorced Zip Code claim homestead at yo	ibed above as your primary plur knowledge. Social Security Number Legally Separated County ur previous address?
tify you (and your spouse if applicable) are a Minne residence. You also certify that the information you Occupant First Name and Initial Are you listed as an owner on the deed? Marital Status: If married, does your spouse occupy the property? Previous Address City Date Vacated Occupant's Spouse First Name and Initial Previous Address City	yes No State Check One: Did you Yes No Occupant's Spouse	rrect to the best of your e	ibed above as your primary plur knowledge. Social Security Number Legally Separated County ur previous address? Social Security Number/ITII

(Rev. 06/14) Continued

SECTION 3A: RESIDENTIAL HOMESTEAD AP	PLICATION (R SECTI	ON 3B: AGRICULTUR	AL HOMESTEAD APPLICATION	
Are you claiming residential homestead?	Yes No	Are you c	laiming agricultural ho	omestead? Yes I	
Is your spouse claiming residential homestead at this property as well?(If applicable)	Yes No	If yes, do you or your spouse claim another agricultural homestead?		aim another Yes	
Are you listed as an owner on the deed?	Yes No	Is your spouse claiming agricultural homestead Yes at this property as well? (If applicable)			
If you are not an owner, are you a qualifying relative of an owner? ¹	Yes No	Yes \No If you are not an owner, a relative of an owner? ²			
		any other	a qualifying relative, a agricultural relative h sota for your family?		
Complete this section ONLY if you are a qualifying	ng relative apply	ing for home	estead. Otherwise, sk	ip to Section 5.	
Property Owner First Name and Initial		Owner Last Na		Relationship to Applicant	
Property Owner Mailing Address					
City	State		Zip Code	County	
Is the property owner a Minnesota resident? Yes No	<u> </u>				
Sign Here (Applicant) I certify that the above information is true and of anyone giving false information in order to avoid of year in prison. This application must be signed by county assessor to receive homestead treatment. Signature of Applicant	or reduce their to v all owners who	ax obligations	is subject to a fine of	up to \$3,000 and/or up to on I lifying relative and returned t	
I certify that the above information is true and of anyone giving false information in order to avoid of year in prison. This application must be signed by county assessor to receive homestead treatment.	or reduce their to all owners who	ax obligations	is subject to a fine of property or by the qua	up to \$3,000 and/or up to on I lifying relative and returned t	
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I certify that the above information is true and canyone giving false information in order to avoid by year in prison. This application must be signed by county assessor to receive homestead treatment. Signature of Applicant Evening Phone	or reduce their to v all owners who Date Email	ax obligations	is subject to a fine of property or by the qua	up to \$3,000 and/or up to on lifying relative and returned t Phone	
I certify that the above information is true and canyone giving false information in order to avoid a year in prison. This application must be signed by county assessor to receive homestead treatment. Signature of Applicant Evening Phone Signature of Applicant's Spouse (If Applicable)	or reduce their to all owners who . Date Email Date	ax obligations	is subject to a fine of property or by the qua	up to \$3,000 and/or up to on lifying relative and returned to Phone	
I certify that the above information is true and of anyone giving false information in order to avoid of year in prison. This application must be signed by county assessor to receive homestead treatment. Signature of Applicant Evening Phone Evening Phone Evening Phone	or reduce their to all owners who . Date Email Date Email	ax obligations	b is subject to a fine of property or by the qual Daytime	up to \$3,000 and/or up to on lifying relative and returned to Phone Phone	
I certify that the above information is true and of anyone giving false information in order to avoid by year in prison. This application must be signed by county assessor to receive homestead treatment. Signature of Applicant Evening Phone Signature of Applicant's Spouse (If Applicable) Evening Phone Signature of Other Owner/s (If Applicable)	Date Date Date Email Date Email Date	ax obligations	b is subject to a fine of property or by the qual Daytime	up to \$3,000 and/or up to on lifying relative and returned to Phone Phone Phone Phone	

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

¹Qualifying relative for **residential homestead** 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.

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.

For manufactured homes assessed as personal property, homestead applications are due by May 29.

How to Apply

Complete the entire application fully and legibly. Mail the application to your county or city 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. For manufactured homes, the application is due by May 29 for taxes payable in the current year.

Applications do not need 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.

SSN/ITIN

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 to Social Security numbers in any other case.

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.