



County ———	-
Case no.	

Application for the Remission of Real Property, Personal Property and Manufactured Home Late-Payment Penalties (R.C. 5711.33, 5715.39)

Taxpayer Instruction	s	Date Received by Treasurer			
Complete the front of this form and file this form with the convidence to the form. Be sure to complete the name and apage. If penalties have accrued for more than one late paramust be filed for each penalty. The address of each	address blank at the bottom of this syment, a separate application form	Date Received by Auditor			
www.ctao.com.					
Please type or print all informati	ion clearly.				
Property tax type: Real property Personal propert	- -				
Amount of penalty \$		y			
Date taxes were due	Date taxes were paid				
Parcel or I.D. number of property					
Please check <u>all</u> the reasons the p The application will only be guaranteed cons For penalties assessed against real or n only be considered if the fifth box be	sideration for the reasons that are nanufactured home property, reas slow is checked and an explanation	checked on this form. onable cause will on is provided.			
Taxpayer did not receive a tax bill or a correct tax bill and attempted to obtain one on (date) Tax payment was mailed on or before due date (submit evidence of timely mailing). A private meter postmark on the envelope is not a valid postmark for establishing the payment date.					
Tax was not timely paid because of serious injury, death, or hospitalization of the taxpayer (within 60 days preceding the due date), but was paid within 60 days after the due date. Taxpayer must submit proof of the above.					
Tax was not paid by due date because of negligence or error of the auditor or treasurer (explain below).					
Taxpayer's failure to make timely payment of the tax w	as due to reasonable cause and not will	ful neglect (explain below).			
Taxpayer statement (use additional pages if necessary)					
Print name and address below	I declare under penalties of per correct and complete.	jury that this report is true,			
Name	Taxpayer signature				
Address	Daytime phone number	Date			
City State ZIP code	E-mail address (optional)				

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Tragelirar	Instructions

Complete this page. Also check the front of the form for taxes were due. If any corrections are necessary, incorpages as necessary. Retain a copy of the completed attachments to the county auditor.	dicate them in the space provided for comments	below or attach additional
The county treasurer should check all that apply:		
Penalty accrued because of the negligence or error	or of a county officer (explain below).	
Taxpayer demonstrated to my satisfaction that time valid postmark for establishing the date of payments.		rk on an envelope is not a
Tax was not timely paid because of the serious injudate, but was paid within 60 days after the due days		60 days preceding the due
Date of hospitalization (if applicable)	· · · · · · · · · · · · · · · · · · ·	
Taxpayer failed to receive a tax bill or a correct bill and Date of request	and made a good faith effort to obtain the bill within	30 days after the due date.
Taxpayer has not made a late payment for any rea years.	or personal property taxes owed by the taxpayer	during the preceding three
The tax liability (including interest) for the subject p	roperty is paid or, if applicable, the taxpayer has er	ntered into a payment plan.
Treasurer's comments (use additional pages if neces	ssary)	
Recommendation: Grant Deny Signature	of treasurer	Date

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Auditor Instructions

Upon receipt of the application from the county treasurer, the county auditor will review the application and any attachments and make a decision in consultation with the county treasurer.

For personal property late-payment penalties, the auditor may apply any of the five reasons listed on the front of this form to remit the penalty, but the auditor must consider each reason for which remission is claimed as indicated by the taxpayer's check in a box on the front of this return.

For real property and manufactured or mobile home penalties, the auditor may apply any of the first four reaons listed on the front of this form to remit the penalty, but the auditor must consider each of the first four reasons for which remission is claimed as indicated by the taxpayer's check in a box on the front of this form. The auditor cannot use reasonable cause as a reason to remit a late payment penalty assessed against real property or manufactured or mobile homes even if the taxpayer has checked the box indicating that reasonable cause is the basis for remission of the penalty. Instead, if the reasonable cause check box is checked and the auditor has not remitted the penalty for another reason, the auditor must deliver the application to the board of revision for consideration. The auditor may not deliver the application to the board of revision unless the reasonable cause box is checked. The auditor must notify the taxpayer of its decision by completing the section below and returning a copy of the completed form to the taxpayer.

Decis	sion of the Auditor
Before the county auditor, the remission is hereby: Date:	
☐ Granted ☐ Denied	
	County auditor
A copy of this decision was mailed to the taxpayer on:	
,,	Date
If the application is denied state the reason for deniel (us	ea additional nages if necessary)

If the application is denied, state the reason for denial (use additional pages if necessary)

Board of Revision Instructions

If the taxpayer has requested remission of a late payment penalty assessed against real property or manufactured or mobile homes because the late payment was due to reasonable cause as indicated by checking the fifth box on the front of this form, then the Board of Revision mustreview the request for remission to determine whether the late paymentwas due to reasonable cause and not the willful neglect of the taxpayer. The board must notify the taxpayer of its decision by completing the section below and returning a copy of the completed form to the taxpayer.

Decision	of the Board of Revision	
Before the Board of Revision, the remission is hereby:	Date:	_
☐ Granted ☐ Denied		
	Clerk of the Board of Revisions	
A copy of this decision was mailed to the taxpayer on :		
	Date	
If the confication is deviced atots the access for device (additional name if names m.).	

If the application is denied, state the reason for denial (use additional pages if necessary):

Taxpayer's Right of Review

Within 60 days after the decision of the county auditor or board of revision is mailed, the taxpayer may apply to the tax commissioner to review the denial of the penalty remission by the auditor or board. The taxpayer should apply for review in the form of a letter to the tax commissioner and should include a copy of the DTE form 23A returned by the auditor or the board which indicates the auditor's or the board's decision and copies of any attachments filed with the original form. Send the request for review to the Ohio Department of Taxation, Tax Equalization Division, P.O. Box 530, Columbus, Ohio 43216-0530.