File this form with th	e
county treasurer.	

County Portage	
oounty ———	
Case no	

DTE 23A Rev. 10/15

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

Taxpayer Instructions: Complete the front of this form a Attach a copy of all evidence to the form, complete the national form. If penalties have accrued for more than one late payr filed for each penalty. Please send completed form to the county treasurer may insert his taxpayer may obtain the address at ohiocountytreasurers.or Brad Cromes  449 South Meridian Street PO Box 1217 Ravenna, Ohio 44266	ame and address blank and sign the ment, a separate application must be bunty treasurer of the county in which or her name and address here or the	Date Received by Treasurer  Date Received by Auditor	
Owner of property	Parcel or I.D.# of property		
Property tax type: Real Manufactured home	Tax year First		
Amount of penalty \$	1 <del></del>	_	
Date taxes were due Date taxes and interest \			
	penalty should be remitted and explain		
☐ Tax was not paid by due date because of negligence or er			
☐ Taxpayer did not receive a tax bill or a correct tax bill and			
Tax was not timely paid because of serious injury, death of but was paid within 60 days after the due date. Taxpayer r	or hospitalization of the taxpayer (within		
Tax payment was mailed on or before due date (submit ev a valid postmark for establishing the payment date.	idence of timely mailing). A private mete	r postmark on the envelope is not	
Taxpayer did not receive a tax bill because the mortgage bill was not sent to the taxpayer. The penalty waiver applied	lender failed to notify the auditor that the es only to the first tax bill after satisfactio	e mortgage was satisfied and the on of the mortgage.	
☐ Taxpayer's failure to make timely payment of the tax was due to reasonable cause and not willful neglect (explain below).			
Taxpayer statement (use additional pages if necessary):			
Print name and address below	I declare under penalties of per and complete.	jury that this report is true, correct	
Name	Taxpayer signature		
Address	Daytime phone number	Date	
City State ZIP	E-mail address		

## **County Treasurer Instructions**

Review the form for completeness and verify the accuracy of the penalty amount and date that taxes were due and paid. If the taxpayer has a late payment history, include the amount(s) and tax period(s) for the preceding three years. Retain a copy of the application for your records. Forward the completed application with any attachments to the county auditor.

The county treasurer should check all that apply:				
<ul> <li>□ Penalty accrued because of the negligence or error of a county of change of address from someone other than the property owner.</li> <li>□ Taxpayer failed to receive a tax bill or a correct bill and made a good Date of request</li></ul>	d faith effort to obtain the bill within 30 days after the due date.			
but was paid within 60 days after the due date.	espitalization of the taxpayer within 60 days preceding the due date,			
Date of death or hospitalization Date of payment Taxpayer demonstrated that timely payment was mailed. A private meter postmark is not valid for establishing the date of payment Taxpayer has not made a late payment for any real property taxes owed by the taxpayer during the preceding three years.				
Treasurer's comments (include late payment history for the preceding three years)				
Recommendation: Grant Deny Signature of treasurer	Date			
	to remit the penalty whether or not checked by the taxpayer. The If the taxpayer checks the reasonable cause box and remission is on to the Board of Revision for consideration. If the applicant does to none of the other five reasons is applicable, then the auditor may reasonable cause, if the auditor believes it is a valid reason to remit de by the Board of Revision. If the auditor does not forward the taxpayer of its decision by completing the section below and			
Granted Denied	Signature of county auditor			
A copy of this decision was mailed to the taxpayer on:				
If the application is denied, state the reason for denial (use additional pages if necessary):				
Board of Revision If the auditor forwards the application to the Board of Revision, the bolate payment was due to reasonable cause and not the willful neglect of by completing the section below and returning a copy of the contraction.	ard must review the request for remission to determine whether the f the taxpayer. <b>The board must notify the taxpayer of its decision</b>			
Before the Board of Revision, the remission is hereby:  ☐ Granted ☐ Denied				
A copy of this decision was mailed to the taxpayer on:	Signature of clerk of the Board of Revision			
If the application is denied, state the reason for denial (use additional	pages if necessary): Date			

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 tax commissioner must receive the appeal by the 60th day following the day the county's decision is mailed. However, if the appeal is mailed by certified mail the date of the U.S. postmark placed on your receipt by the postal service will be treated as the date filed. The taxpayer should apply for review in the form of a letter to the tax commissioner and include a copy of the denial issued by the auditor or board of revision, the DTE form 23A returned by the auditor or the board that indicates the decision and copies of 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.