AFFIDAVIT IN SUPPORT OF APPLICATION FOR REMOVAL OF NAME FROM THE GENERAL TAX LIST AND DUPLICATE OF REAL AND PUBLIC UTILITY PROPERTY

STATE OF OHIO)
) SS:
COUNTY OF MONTGOMERY)

PARCEL NO. _____

_____ (Insert Name), being duly sworn under oath, deposes and says:

1. Pursuant to Ohio Revised Code § 319 (B)(1), I hereby request that the Montgomery County Auditor remove my name from both the General Tax List and Duplicate of Real and Public Utility Property and any electronic records available on the Internet.

2. Pursuant to the above-mentioned section, I hereby request that the Montgomery County Auditor insert my initials in place of my name.

3. I certify that I am employed in one of the following public safety sectors:

   (Check the Applicable Box)

   ☐ Peace Officer

   ☐ Parole Officer

   ☐ Prosecuting Attorney

   ☐ Assistant Prosecuting Attorney

   ☐ Correctional Employee

   ☐ Youth Services Employee

   ☐ Firefighter or Emergency Medical Technician

4. I am employed by _____ (Insert Employer).

5. I understand that the Montgomery County Auditor may verify my current employment prior to removing my name from the General Tax List and Duplicate.

6. I also understand that, pursuant to Ohio Revised Code § 319 (B)(2), the Montgomery County Auditor shall inform me within five business days if and why removal and insertion is impracticable at _____ (phone number).

Further affiant sayeth naught.

_____
(NAME)

Sworn to before me and subscribed in my presence by the above signed individual on _____, 20__.

_____
Notary Public