Vacant Property Tax

Certification of Zero Income

To be completed by owner/s or household members who are claiming zero income from any source. Owner/s must also submit an income based exemption form, under O.M.C. 4.56.090(A)(G)(H).

Applicant/Owner Name:	F	Parcel #:
Property Address:		
I hereby certify that I do not individu	ally receive income from any o	of the following sources:
a. Wages from employment (includ	ing commissions, tips, bonuse	s, fees, etc.);
b. Income from the operation of a b	usiness;	
c. Rental income from real estate o	r personal property;	
d. Interest or dividends from assets	· ,	
e. Social Security payments, annuit death benefits;	ies, insurance policies, retiren	nent funds, pensions, or
f. Unemployment or disability bene	fits;	
g. Public assistance payments;		
h. Periodic allowances such as alim from persons not living in my hou		eived
i. Sales from self-employed resour	ces (Avon, Mary Kay, etc.);	
j. Any other sources not named ab	ove.	
Choose one:		
Currrently, I have no income no definite job offer at this tire	of any kind, and while I am se	eeking employment, I have
Currently, I have no income	of any kind and will not be see	king employment at this time.
I will be using the following sources	of funds to pay for living expe	nses and other necessities:
Under penalty of perjury, I certify and accurate to the best of my kn providing false representations he	owledge. The undersigned fur	ther understand(s) that
Signature of Applicant/Owner	Printed Name of Applicant/C)wner Date