____ Existing Homestead ____ New Homestead

CR-H

OFFICE USE ONLY

Applicant Name

Assessment Year

Assessor or Representative's Signature

Date

Type of Application
- ☐ Owner Occupied
- ☐ Relative/Residential
- ☐ Relative/Agricultural

Determination
- ☐ Approved
- ☐ Denied

Homestead Application

Applications are due to your county assessor's office by December 15. Please read all instructions before completing this application. NOTE: Each applicant must complete a separate form to apply for homestead (see Section 2 for married couple applicant instructions).

SECTION 1: PROPERTY INFORMATION

This section MUST be completed. Please provide the following information on the property you are claiming homestead.

Address of Property			
Property ID Number (Found on the Property Tax Statement)			
City	State	Zip Code	County
Date Purchased	Date Occupancy Established by Applicant(s)		

SECTION 2: OCCUPANT INFORMATION

This section must be completed by EACH individual or married couple applying for homestead. By completing this section, you certify you (and your spouse if applicable) are a Minnesota resident, and occupy the property described above as your primary place of residence. You also certify that the information you provide is true and correct to the best of your knowledge.

Occupant First Name and Initial	**Occupant** Last Name	Social Security Number
Are you listed as an owner on the deed?	☐ Yes ☐ No	
Marital Status:	☐ Single ☐ Married ☐ Divorced ☐ Legally Separated	
If married, does your spouse occupy the property?	☐ Yes ☐ No	
Previous Address		
City	State / Zip Code	County
Date Vacated	**Check One:** Did you claim homestead at your previous address? ☐ Yes ☐ No	
Occupant's Spouse First Name and Initial	**Occupant's Spouse** Last Name	Social Security Number/ITIN
Previous Address		
City	State / Zip Code	County
Date Vacated	**Check One:** Did you claim homestead at your previous address? ☐ Yes ☐ No	

SECTION 3: HOMESTEAD APPLICATION

Complete Section 3A to apply for residential homestead OR Section 3B to apply for agricultural homestead. NOTE: If you are not sure whether you qualify for agricultural homestead, please contact your county assessor.

SECTION 3A: RESIDENTIAL HOMESTEAD APPLICATION			OR	SECTION 3B: AGRICULTURAL HOMESTEAD APPLICATION		
Are you claiming residential homestead?	☐ Yes	☐ No		Are you claiming agricultural homestead?	☐ Yes	☐ No
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?	☐ Yes	☐ No
Are you listed as an owner on the deed?	☐ Yes	☐ No		Is your spouse claiming agricultural homestead at this property as well? (If applicable)	☐ Yes	☐ No
If you are not an owner, are you a qualifying relative of an owner?[1]	☐ Yes	☐ No		If you are not an owner, are you qualifying relative of an owner?[2]	☐ Yes	☐ No
				If you are a qualifying relative, are there any other agricultural relative homesteads in Minnesota for your family?	☐ Yes	☐ No

SECTION 4: RELATIVE HOMESTEAD APPLICATION

Complete this section ONLY if you are a qualifying relative applying for homestead. Otherwise, skip to Section 5.

Property Owner First Name and Initial	**Property Owner** Last Name		Relationship to Applicant
Property Owner Mailing Address			
City	State	Zip Code	County

Is the property owner a Minnesota resident?

☐ Yes ☐ No

SECTION 5: SIGNATURE

Sign Here (Applicant)

I certify that the above information is true and correct to the best of my knowledge. *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. This application must be signed by* ***all owners who occupy the property*** *or* ***by the qualifying relative*** *and returned to the county assessor to receive homestead treatment.*

Signature of Applicant	Date	Daytime Phone
Evening Phone	Email	
Signature of Applicant's Spouse (If Applicable)	Date	Daytime Phone
Evening Phone	Email	
Signature of Other Owner/s (If Applicable)	Date	Daytime Phone
Evening Phone	Email	
Signature of Other Owner/s (If Applicable)	Date	Daytime Phone
Evening Phone	Email	

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

[1]Qualifying 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.

[2]Qualifying 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.

Fax: (952) 361-1959 or mail to:
Carver County Assessor's Office
600 E. 4th St.
Chaska, MN 55318