

Principal Residence Exemption (PRE) Affidavit

Issued under authority of Public Act 206 of 1893.

Read the instructions page before completing the form. Completion of this Affidavit constitutes a claim for a Principal Residence Exemption (PRE) when filed with the local assessor of the city or township where the property is located. Filing this Affidavit invalidates any previous PRE the homeowner may have claimed. A Request to Rescind Principal Residence Exemption (PRE) (Form 2602) or a Conditional Rescission of Principal Residence Exemption (PRE) (Form 4640) must be filed with the local assessor for any previous claims.

Print or type in blue or black ink. Use a separate form for each property number.

PART I PROPERTY INFORMATION

▶ Property Tax Identification Number		Name of City, Township or Village (taxing authority)			
▶ Street Address of Property	▶ City	<input type="checkbox"/> City	<input type="checkbox"/> Township	<input type="checkbox"/> Village	
▶ Owner's First, Middle and Last Names		▶ State	▶ ZIP Code	County	
		▶ Social Security Number		▶ Telephone Number	
▶ Co-Owner's First, Middle and Last Names		▶ Social Security Number		▶ Telephone Number	

- The property above is my
 - Principal Residence
 - Residential Unoccupied Contiguous or Adjacent Lot
- Date the property became your principal residence (mm/dd/yyyy)
 - ▶ _____ %
- If this parcel has more than one home on it, or if you own and live in one unit of a multiple-unit dwelling (or a multi-purpose property) give the percentage of the entire property that your unit (your principal residence) occupies. Your exemption will be based on this percentage
 - ▶ _____ %
- Have you claimed a principal residence exemption for another Michigan principal residence?
 - Yes
 - No
- If yes, have you rescinded that principal residence exemption?
 - Yes
 - No
- Do you or your spouse claim an exemption, credit or deduction on property located in another state?
 - Yes
 - No
- Have you or your spouse filed a tax return as a resident of another state?
 - Yes
 - No

PART II CERTIFICATION

Owner's Mailing Address (if different from property address above)	City	State	ZIP Code
Closing Agent or Preparer's First Name	Last Name		
Closing Agent or Preparer's Mailing Address	City	State	ZIP Code

Certification: I certify under penalty of perjury the information contained on this document is true and correct to the best of my knowledge.

Owner's Signature	Date
Co-Owner's Signature	Date

LOCAL GOVERNMENT USE ONLY (do not write below this line)

Was an exemption in place prior to this affidavit being filed?	▶ First year exemption to be posted to tax rolls?	Property Classification
<input type="checkbox"/> Yes	<input type="checkbox"/> No	