

**OTC 921**

Revised 11-2022

**State of Oklahoma  
Application for Homestead Exemption**

Return to County Assessor

**Tax Year**  
**2023 | 2024**

Comanche

(to be completed by applicant)  
**Part One**  
**Applicant**

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (MI) \_\_\_\_\_  
Account Number: \_\_\_\_\_  
Property Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Daytime Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_ Email Address: \_\_\_\_\_

|                           |                 |
|---------------------------|-----------------|
| <b>LEGAL DESCRIPTION:</b> | School District |
|---------------------------|-----------------|

PLEASE MARK THE APPROPRIATE BOX

- Are you a legal resident of Oklahoma?
- Is any portion of the property rented or leased?
- Do you own only a partial or undivided interest?
- Is the property held in a revocable trust?
- Is your residence a manufactured home?
- If a manufactured home, is the title in your name?
- If a manufactured home, do you own the land where it is located?
- Is any part of the described property used as commercial?
- Do you currently, or did you in the previous year, have homestead exemption in this State?

If so, list address \_\_\_\_\_, \_\_\_\_\_ City \_\_\_\_\_ County

List all owners who reside on property and their relationship to each other:

(to be completed by applicant)  
**Part Two**  
**Ownership**

PLEASE MARK THE APPROPRIATE BOX

- A**
- Did you own this property on or before January 1 of this year?
  - Were you occupying this property as your place of residence on January 1 of this year?
  - Was or will your deed or other evidence of ownership be of record with the County Clerk's Office on or before February 1 of this year?

**NOTE:** (If today's date is after March 15 of this year, or if you answered "no" to any question in section "A," you may not qualify for this year's exemption. To apply for next year's exemption, complete section "B" of this application.)

Homestead exemption cannot be approved if you do not own and occupy the subject property as your place of residence on January 1 each year the exemption is applied, including the year of application.

PLEASE MARK THE APPROPRIATE BOX

- B**
- Do you own this property?
  - Will you, to the best of your knowledge, own and occupy this property as your place of residence January 1 of next year?
  - Will your deed or other evidence of ownership be of record with the County Clerk's Office on or before February 1 of next year?

**Part Three**  
**Assessor**

Under penalty of perjury, I the undersigned, affirm that all information provided and herein contained are true and correct to the best of my knowledge.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

County Assessor or Deputy \_\_\_\_\_ Date \_\_\_\_\_

**Approved beginning** \_\_\_\_ **tax year.**

**Disapproved. Reason** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_