AFFIDAVIT FOR PRIMARY RESIDENCE CLASSIFICATION

Parcel No. _____
Book - Map - Parcel
Property Address: _____
Owner(s): _____
Mail address: _____
_____

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To ensure proper classification is assigned to your residential property, this office requires additional verification of property use. As of July 1, 2011 the definition of owner occupancy has changed and is now referred to as PRIMARY RESIDENCE. This application will verify that the correct classification is assigned to your property.

PRIMARY RESIDENCE DEFINITION:

Primary Residence is your one and only main residence where you or a qualified family member resides. You can have only one primary residence no matter how many homes you own. If the property listed is used as a vacation home, leased or rented to a non-qualified family member or if you claim a home in another state as your primary residence, the listed home cannot qualify as a primary residence.

If you have questions concerning this matter, please contact our office at (520) 724-8630

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Please check the item(s) below which most accurately defines the status of your property, sign the application and return it to our office.

3.1 This property is my Primary Residence as of _____(Month/Year) and is not used as a secondary residence or a vacation home.

3.2 This property is the Primary Residence of a Qualified Family member, as indicated below, as of _____.*****

- ☐ a natural or adopted child or grandchild
- ☐ a stepson or stepdaughter
- ☐ the father or mother of the owner, grandparent or great-grandparent
- ☐ a stepfather or stepmother
- ☐ a son-in-law, daughter-in-law, father-in-law or mother-in-law
- ☐ a natural or adopted brother or sister

3.3 This property is my Primary Residence as of _____(Month/Year) and is being rented/leased to lodgers.*****

Pursuant to A.R.S 33-1901 and 33-1902 Qualified Family Member and Rental Properties are required to be registered with the Assessor. Please include the Registration of Arizona Residential Rental Property Form with this form

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The Undersigned states or declares under penalty of perjury that the foregoing information is a true and correct statement of the facts pertaining to the use of the above property.

Signature: _____ Date: _____

OFFICIAL CHANGE OF MAILING ADDRESS:

If notices regarding classification did NOT come to your current mailing address and you want to request to change it in our records, please indicate your mailing address below:

_____
Name

_____
Street Address/PO Box

_____ _____ _____
City State Zip Code

Print Form