**Residential Classification Form**

<table>
<thead>
<tr>
<th>Date:</th>
<th>Parcel Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Owner's Name:</td>
<td>Property Address:</td>
</tr>
<tr>
<td>Mailing Address:</td>
<td></td>
</tr>
</tbody>
</table>

*Please select Option A, B, C or D below. If you have any questions or concerns about this document, please contact us at (928) 428-2828. 30 Day Response Deadline*

**Option A:** This is my primary residence (9 months occupancy required): In compliance with HC 2001, 2nd session.

**Option B:** The residence identified above is not rented but does not meet the definition of a Primary Residence (e.g., it is a vacation home, secondary residence, unoccupied, or unoccupied and listed for sale, etc.)

**Option C:** This is a Rental Property. This is in compliance with A.R.S. 33-1902 (A). The owner shall update any information required by this section with the County Assessor within ten days after a change.

**Option D:** Yes, my property is occupied by a family member as indicated below. I rent or allow a member of the family to occupy the home. This must be:

- [ ] Natural adopted parent or child or;
- [ ] Stepson or stepdaughter of the owner or;
- [ ] Father/Mother/Grandparent or Great-grandparent or;
- [ ] Son-in-law/ Daughter-in-law/ Father-in-law/ Mother-in-law or;
- [ ] Natural or Adopted sibling of the owner

Name of Relative

__________________________________________

Mailing Address of Relative

Signature of Owner

_________ Phone __________ Date