



APPLICATION FOR EXEMPTION FROM PAYMENT OF PERMISSIVE TAX BY NON-RESIDENT MEMBER OF THE ARMED FORCES

OWNER FIRST NAME	LAST NAME	MI
OHIO RESIDENT ADDRESS		
CITY	STATE	ZIP CODE
MILITARY ADDRESS		
CITY	STATE	ZIP CODE
BRANCH OF SERVICE	SERVICE #	
LEGAL RESIDENCE		
CITY	STATE	ZIP CODE

I understand the penalty as covered in section 2921.13 of the Ohio Revised Code which concerns making a false statement on an application.

APPLICANT SIGNATURE X

CERTIFICATION

I, the undersigned, certify that the above named individual is not a legal resident of Ohio (his/her legal state of residence is shown above).

COMMANDING OR PERSONNEL OFFICER SIGNATURE X
X
X

THIS FORM IS TO BE COMPLETED ONLY WHEN THE ABOVE APPLICANT IS NOT A LEGAL RESIDENT OF OHIO, BUT IS CURRENTLY STATIONED IN OHIO.