



Additional Owners Living at the Property Supplement to Minneapolis Homestead Application

Property Owner(s) as Listed on the Deed must fill out this section.

Owner 3 Last Name	First Name	Middle Initial	Social Security Number
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What is your marital status? Single ___ Married ___ Widowed ___ Divorced ___ Legally Separated ___
 If married, does your spouse occupy the property? Yes No
 Move in date: _____ Daytime phone number: _____
 Is this also your mailing address? Yes No if no, please explain. _____

Owner 4 Last Name	First Name	Middle Initial	Social Security Number
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What is your marital status? Single ___ Married ___ Widowed ___ Divorced ___ Legally Separated ___
 If married, does your spouse occupy the property? Yes No
 Move in date: _____ Daytime phone number: _____
 Is this also your mailing address? Yes No if no, please explain. _____

Owner 5 Last Name	First Name	Middle Initial	Social Security Number
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What is your marital status? Single ___ Married ___ Widowed ___ Divorced ___ Legally Separated ___
 If married, does your spouse occupy the property? Yes No
 Move in date: _____ Daytime phone number: _____
 Is this also your mailing address? Yes No if no, please explain. _____

Owner 6 Last Name	First Name	Middle Initial	Social Security Number
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What is your marital status? Single ___ Married ___ Widowed ___ Divorced ___ Legally Separated ___
 If married, does your spouse occupy the property? Yes No
 Move in date: _____ Daytime phone number: _____
 Is this also your mailing address? Yes No if no, please explain. _____

This supplement along with the homestead application and **copies** of the deed and certificate of real estate value (and if relative homestead, proof of relationship), can be submitted by one of the following:

- Fax: 612-673-3538
- Mail: City of Minneapolis Assessor's Office
- Email: home.stead@ci.minneapolis.mn.us
- 309 2nd Avenue South, Room 100
- Minneapolis, MN 55401-2234
- Placed in the City Assessor's Office lobby area lock box
- 309 2nd Avenue South, Room 100