**BILLINGS COUNTY**
TAX EQUALIZATION & ZONING OFFICE
PHONE: (701) 623.4810 ● FAX: (701) 623.4761
495 4TH STREET ● PO BOX 247 - MEDORA, ND 58645-0247
stswanson@nd.gov jhammerstrom@nd.gov

APPLICATION: _____

# AFFIDAVIT

**APPLICANT:** Name: _____

Phone: _____ Cell: _____ Email: _____

**OWNER:** ☐ Same as above Name: _____

**LEGAL DESCRIPTION OF PROPERTY:** Parcel Number: _____ - _____ - _____ - _____

Qtr/Qtr: _____Section: _____ Township:_____ Range: _____

**Under Penalty of Perjury, I certify that the structure proposed falls under the North Dakota Century Code 54-21.3-04. Deeming this structure is exempt.**

**The following exemptions include but are not limited to: (Please indicate which exemption you wish to claim)**

☐ Building which is neither heated nor cooled.

☐ Buildings used peak design rate of energy usage is less than one watt per square foot [929.0304 square centimeters] or three and four-tenths British thermal units are hour per square foot [929.0304 square centimeters] of floor area.

☐ A restore or reconstructed building deliberately preserved beyond its normal term of use, because of the historical associations, architectural interests, or public policy, or buildings otherwise qualified as a pioneer building, historical site, state monument, or other similar designation pursuant to state and local law.

☐ Any building used for agricultural purposes, unless a place of human habitation or for use by the public, is exempt from this chapter.

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STATE OF NORTH DAKOTA }
} ss
COUNTY OF BILLINGS }

On this _____ day of _____, in the year _____, before me personally appeared _____, known to me to be the person described in and who executed the within and foregoing instrument, and severally acknowledged to me that _____ executed the same.
(he/she)

(SEAL)

_____

Notary Public
State of North Dakota