



**Part III – Benefits Payable by an Insurance Company (to be completed by insurer)**

1. A consent is **not** necessary for straight life insurance payable to a named beneficiary other than the estate.
2. Please complete Part V – listing all beneficiaries' information
3. A separate application consent form is **not** required for each beneficiary. Please complete only **one** consent application form for each policy or contract.

Name of insured		Owner of policy or contract	
Name and address of insurance company	Type of policy or contract	Number of policy or contract	
	Value at date of death	If annuity, yearly payment	

**Part IV – Employment-Related Benefits (to be completed by employer)**

1. A separate application consent form is **not** required for each beneficiary. Please complete only **one** consent application form for each death benefit.
2. Please complete Part V – listing all beneficiaries' information

Name and address of employer	<p><b>This form is not for IRAs and Keogh plans held in a banking institution. Use estate tax forms 12 and 14.</b></p>
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Date of death value \$ \_\_\_\_\_ Check one:  IRA  Keogh  Other

Lump sum \$ \_\_\_\_\_ Annually \$ \_\_\_\_\_ Monthly \$ \_\_\_\_\_ Other \$ \_\_\_\_\_

**Part V – Beneficiary Information**

Please complete the beneficiary information as it applies to Part III and Part IV above.

Beneficiary's Name	Address	Relationship to decedent
1.		
2.		
3.		
4.		
5.		
6.		

## General Information

All county auditors have been appointed agents of the tax commissioner for the purpose of issuing consents to transfer (R.C. section 5731.41)

### How to obtain a release

Submit this completed application to the county auditor in the county of the decedent's residence. The county auditor will review the application and return a copy to the applicant. If the name and address of the county auditor are needed, please call the Ohio Department of Taxation, Estate Tax Division, at 1-800-977-7711.

1. Complete a separate application for each benefit.
2. Application will **not** be processed unless completed in its entirety and signed by the applicant.
3. The approval of a consent to transfer does not determine a tax liability.
4. The county auditor will forward a copy of the approved application to the tax commissioner.

**For nonresident decedents**, submit this completed application to the Ohio Department of Taxation, Estate Tax Division, P.O. Box 183050, Columbus, OH 43218-3050. This division will review the application and return a copy to the applicant.

### When a consent to transfer is required (R.C. section 5731.09(A) and (B) and R.C. section 5731.39 (C) and (D))

**A consent must** be obtained for the following:

1. Annuities payable to a named beneficiary or the estate.
2. Matured endowments payable to a named beneficiary or the estate.
3. Supplemental contracts payable to a named beneficiary or the estate.
4. Straight life insurance payable to the estate.
5. Life insurance owned by decedent on the life of another person.
6. Employer-related death benefits in excess of \$2,000, including:
  - a. retirement benefits payable to a named beneficiary or the estate;
  - b. pension or profit-sharing plans payable to a named beneficiary or the estate;
  - c. IRAs payable to a named beneficiary or the estate;
  - d. Keoghs payable to a named beneficiary or the estate;
  - e. corporate plans, whether qualified or unqualified, payable to a named beneficiary or the estate;
  - f. any deferred compensation program; and
  - g. bonus plans.

### When a consent to transfer is not required (R.C. section 5731.09)

A consent is **not** required for the following:

1. Straight life insurance benefits payable to a named beneficiary other than the estate; or
2. When any of the above-listed assets are payable to the surviving spouse and the date of death is on or after 10/01/96; or
3. Any of the above-listed assets are \$25,000 or less, regardless of beneficiary; or
4. The Federal Coal Mine and Safety Act annuity payable under Title IV of 1969 (black lung benefits).