

Original Application for Ad Valorem Tax Exemption

County _____ Tax year _____ Case _____ Clerk _____

Property ID _____ New _____ Change _____ Additional _____

Applicant Name and address _____

1 Co-Applicant name (s) _____

Legal Description _____

2 Phone _____

3 Marital Status Single Married Widow Widower Divorced

4 Are you or your spouse receiving tax benefits in another county, state or Country?
(i.e. Homestead, school tax relief, tax rebate, rollback, lottery credit, etc.)

Yes No If yes, Where? _____

5 Your last year's address Own Rent Other

6 Do you or your spouse own property anywhere other than Florida?

Yes No If yes, Where? _____

7 Do you or your spouse have an out of state drivers license or vehicle tag?

Yes No If yes, Where? _____

8 Did you file tax exemptions last year?

Yes No If yes, Where? _____

9 Email Address _____

Permanent Florida residency required as of January 1

- Homestead exemption up to \$50,000*
- \$500 Widow's exemption
- \$500 Widower's exemption
- \$500 Disability exemption
- \$500 Blind persons exemption
- \$5000 Disabled Veteran exemption
- Total and permanent disability exemption - Quadriplegics
- Service connected total and permanent disability exemption
- Exemption for disabled veterans confined to wheelchairs
- Total and permanent disability exemption
- Surviving spouse of veteran who died while on active duty
- Surviving spouse of first responder who died in the line of duty
- By local ordinance only:**
- Age 65 and older with limited income
(amount determined by ordinance)

(Additional documentation may be required)

Ownership information

Percent of ownership _____ Type of Deed _____
Recorded: Book _____ Page _____
Date recorded _____ Date of deed _____

NOTE: Disclosure of your social security number is mandatory. It is required by section 196.011 (1), Florida Statutes. The social security number will be used to verify taxpayer identity information and homestead exemption information submitted to property appraisers.

Proof of Residence for all owners

10	Give address of each owner not residing on property			
11	Date you last became a permanent resident of Florida			
12	Date of occupancy			
13	Florida driver license number	(date)	(date)	(date)
14	Florida vehicle tag number			
15	Florida voter registration number (if U.S. citizen)	(date)	(date)	(date)
16	Immigration number (Alien Card- if not U.S. citizen)	(date)	(date)	(date)
17	Declaration of domicile	Res. date	Res. date	Res. date
18	Date of birth			
19	Current employer			
20	Address listed on last IRS return			
21	Social Security Number			
22	Signature / Date			

I authorize this agency to obtain information to determine my eligibility for the exemptions applied for. I qualify for these exemptions under Florida Statutes. I am a permanent resident of the State of Florida and I own and occupy the property above. I understand that under section 196.131(2), Florida Statutes, any person who knowingly gives false information to claim homestead exemption is guilty of a misdemeanor of the first degree, punishable by imprisonment up to 1 year, a fine up to \$5,000 or both. Under penalties of perjury, I declare that I have read the foregoing application and the facts in it are true.

NOTE: If all information is not received by March 1st, your application will be processed for whatever exemptions you qualify for on that date.