Residence Homestead Exemption Application

Appraisal District's Name		Phone (area code and number)		
Appraisal District Address, City, State, ZIP Code	Website Address (if applicable)	te Address (if applicable)		
GENERAL INSTRUCTIONS This application is for use in clai 11.133, 11.134 and 11.432. The exemptions apply only to prop	0		2,	
FILING INSTRUCTIONS: You must furnish all information an whether the statutory qualifications for the exemption have be appraisal district office in each county in which the properties. A directory with contact information for appraisal of the contact information and the contact informat	een met. This document and a erty is located. Do not file this	all supporting documentation must be filed with the is document with the Texas Comptroller of Public	Э	
APPLICATION DEADLINES: You are to file the completed at the year for which you are requesting an exemption. If you que homesteads of partially disabled veterans, you are to apply for	ualify for the age 65 or older or	disabled persons exemption or the exemption for donated		
Pursuant to Tax Code Section 11.431, you may file a late apple beginning with the 2016 tax year, the late application must be			ive	
DUTY TO NOTIFY: If the chief appraiser grants the exemptio to do so or if you want the exemption to apply to property not year after your right to this exemption ends.		nust notify the chief appraiser in writing before May 1 of the	ou	
Pursuant to Tax Code Section 11.45, after considering this ap from you. You must provide the additional information within 3 may extend the deadline for furnishing the additional information.	plication and all relevant inform 30 days of the request or the ap	nation, the chief appraiser may request additional information oplication is denied. For good cause shown, the chief apprais		
SECTION 1: Former and Current Residence				
Do you own and live in the property for which you are seekin	g this residence homestead ex	emption? Yes	No	
Date you purchased this property Date you began occupy as your principal reside	ying this property	oplying for this exemption for tax year(s).		
Previous Residence Address, City, State, ZIP Code		Previous County		
Were you receiving a homestead exemption on your previous	residence?	Yes	No	
SECTION 2: Property Owner/Applicant				
The applicant is the following type of property owner:				
Single Adult Married Couple	Other (e.g., individual who own	ns the property with others)		
Name of Property Owner 1	Birth Date* (mm/dd/yyyy)	Driver's License, Personal ID Certificate or Social Security Number**		
Primary Phone Number (area code and number) Email Address	3***	Percent Ownership Interest		
Name of Property Owner 2 (e.g., Spouse, Co-Owner/Individual)	Birth Date* (mm/dd/yyyy)	Driver's License, Personal ID Certificate or Social Security Number**		
Primary Phone Number (area code and number) Email Address	***	Percent Ownership Interest		
residence homestead exemption. In section 8 of this for	rm, provide the following informer's license, personal ID certific	es than 100 percent in the property for which you are claiming nation for each additional person who has an ownership intereate or social security number; primary phone number; email	rest	

SECTION 3: Types of Residence Homestead Exemptions

Place an X or check mark beside each type of residence homestead exemption for which you are applying for the property described in section 4. A brief description of the qualifications for each type of exemption is provided beside the exemption name. For complete details regarding each type of exemption and its specific qualifications, you should consult Tax Code Chapter 11, Taxable Property and Exemptions. You may call your county appraisal district to determine what homestead exemptions are offered by the taxing units in your area. GENERAL RESIDENCE HOMESTEAD EXEMPTION (Tax Code Section 11.13(a) and (b)). You may qualify if: you owned this property on Jan. 1; you occupied it as your principal residence on Jan. 1; and you and your spouse do not claim a residence homestead exemption on any other property. DISABLED PERSON EXEMPTION (Tax Code Section 11.13(c) and (d)). You cannot receive an age 65 or older exemption if you receive this exemption. You may qualify if you are under a disability for purposes of payment of disability insurance benefits under Federal Old-Age, Survivors, and Disability Insurance. AGE 65 OR OLDER EXEMPTION (Tax Code Section 11.13(c) and (d)). This exemption is effective Jan. 1 of the tax year in which you become age 65. You cannot receive a disability exemption if you receive this exemption. You may qualify if you are 65 years of age or older. SURVIVING SPOUSE OF AN INDIVIDUAL WHO QUALIFIED FOR AGE 65 OR OLDER EXEMPTION (Tax Code Section 11.13(q)). You cannot receive this exemption if you receive an exemption under Tax Code Section 11.13(d). You may qualify if: your deceased spouse died in a year in which he or she qualified for the age 65 or older exemption under Tax Code Section 11.13(d); you were 55 years of age or older when your deceased spouse died; and the property was your residence homestead when your deceased spouse died and remains your residence homestead. 100 PERCENT DISABLED VETERANS EXEMPTION (Tax Code Section 11.131(b)). You may qualify if you are a disabled veteran who receives from the U.S. Department of Veterans Affairs or its successor: • 100 percent disability compensation due to a service-connected disability, and a rating of 100 percent disabled or individual unemployability. Is the disability a permanent total disability as determined by the U.S. Department of Veterans Affairs under 38 C.F.R. Section 4.15? No SURVIVING SPOUSE OF A DISABLED VETERAN WHO QUALIFIED OR WOULD HAVE QUALIFIED FOR THE 100 PERCENT DISABLED VETERAN'S EXEMPTION (Tax Code Section 11.131(c) and (d)). You may qualify if: you were married to a disabled veteran who qualified for an exemption under Tax Code Section 11.131(b) at the time of his or her death or would have qualified for the exemption if the exemption had been in effect on the date the disabled veteran died; you have not remarried since the death of the disabled veteran; and the property was your residence homestead when the disabled veteran died and remains your residence homestead. DONATED RESIDENCE HOMESTEAD OF PARTIALLY DISABLED VETERAN (Tax Code Section 11.132(b)). You may qualify if: you are a disabled veteran with a disability rating of less than 100 percent; and your residence homestead was donated to you by a charitable organization at no cost to you or at some cost that is not more than 50 percent of the good faith estimate of the market value of the residence homestead as of the date the donation is made. Percent Disability Rating SURVIVING SPOUSE OF A DISABLED VETERAN WHO QUALIFIED FOR THE DONATED RESIDENCE HOMESTEAD EXEMPTION (Tax Code Section 11.132(c) and (d)). You may qualify if: you were married to a disabled veteran who qualified for an exemption under Tax Code Section 11.132(b) at the time of his or her death; you have not remarried since the death of the disabled veteran; and the property was your residence homestead when the disabled veteran died and remains your residence homestead. SURVIVING SPOUSE OF A MEMBER OF ARMED SERVICES KILLED IN ACTION (Tax Code Section 11.133(b) and (c)). You may qualify if: you are the surviving spouse of a member of the U.S. armed services who is killed in action; and you have not remarried since the death of the member of the armed services. SURVIVING SPOUSE OF A FIRST RESPONDER KILLED IN THE LINE OF DUTY (Tax Code Section 11.134). You may qualify if: you are the surviving spouse of a first responder who is killed or fatally injured in the line of duty;**** and you have not remarried since the death of the first responder. SURVIVING SPOUSES: If you indicated eligibility for one of the surviving spouse exemptions above, provide the following information regarding your deceased spouse:

Date of Death

Name of Deceased Spouse

SECTION 4: Property that Qualifies for Residence Homestead Exemption

Physical Address (i.e. street address, not P.O.	3ox), City, County, ZIP Code			
Legal Description (if known)	•••	Appraisal District Account Number or Property Identification Number (if known)		
Applicant's Mailing Address (if different from the	e physical address of the principal residence p	provided above)		
Is any portion of the property for which y	ou are claiming a residence homestead e	exemption income producing?	Yes No	
If yes, indicate the percentage of the	property that is income producing:	percent		
Number of acres (or fraction of an acre,	not to exceed 20 acres) you own and occ	cupy as your principal residence:	acres	
If your principal residence is a manufactor	ured home, provide the make, model and	identification number:		
Make	Model	ID Number		
. , . ,	ock in a cooperative housing corporation, s identified above?	,	Yes No	
SECTION 5: Application Documen	ts			
personal identification certificate must be exempt from these requirements if	correspond to the address of the propout reside in certain facilities or partici	certificate. The address listed on your driver's li- perty for which an exemption is claimed in this a ipate in a certain address confidentiality progra bers or their spouses or holders of certain drive	application. You may m. The chief appraiser	
Indicate if you are exempt from the requi	rement to provide a copy of your driver's	license or state-issued personal identification cert	ificate.	
I am a resident of a facility that pro	ovides services related to health, infirmity	or aging.		
Name and Address of Facility				
I am certified for participation in th Procedure Chapter 56, Subchapte	- · · · ·	stered by the Office of the Texas Attorney General	under Code of Criminal	
	raiser waive the requirement that the add e or state-issued personal identification of	lress of the property for which the exemption is classificate:	aimed corresponds to	
	•	n active duty member. Attached are a copy of my r t to the claimed exemption in my name or my spou	,	
I hold a driver's license issued und	ler Transportation Code Section 521.121(c) or 521.1211. Attached is a copy of the application	n for that license.	

Provide the physical address of the property you own and occupy as your principal residence and for which you are claiming a residence homestead exemption.

100 PERCENT DISABLED VETERAN OR SURVIVING SPOUSE EXEMPTION

An applicant for this exemption must provide documentation from the U.S. Department of Veterans Affairs indicating that the veteran:

- received 100 percent disability compensation due to a service-connected disability; and
- had a rating of 100 percent disabled or individual unemployability.

An applicant must provide documentation to support the request for the following exemptions:

- Donated Residence Homestead of Partially Disabled Veteran
- Surviving Spouse of Member of Armed Forces Killed In Action
- Surviving Spouse of First Responder Killed In The Line of Duty****

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If you are seeking to transfer a tax limitation or surviving spouse exemption from a previous residence, place an X or check mark beside the type of tax limitation or exemption transfer you are seeking. Otherwise skip this section.
Tax limitation (Tax Code Section 11.26(h) or 11.261(h))
100 Percent Disabled Veteran's Exemption (Tax Code Section 11.131(d))
Donated Residence Homestead of Partially Disabled Veteran (Tax Code Section 11.132(d))
Member of Armed Services Killed in Action (Tax Code Section 11.133(c))
First Responder Killed in the Line of Duty (Tax Code Section 11.134(d))
Address of last residence homestead:
Previous Residence Address, City, State, ZIP Code
SECTION 7: Ownership Documentation; Affidavits
Complete this section if the residence homestead is a manufactured home OR you are an applicant for an age 65 or older or disabled exemption and you are not specifically identified on the deed or other instrument. Otherwise, skip this section.
AGE 65 OR OLDER OR DISABLED PERSON EXEMPTION If you are not specifically identified on a deed or other instrument recorded in the applicable real property records as an owner of the residence homestead, you must provide:
an affidavit (see last page); or
 other compelling evidence establishing the applicant's ownership of an interest in the homestead.
MANUFACTURED HOMES Owners of manufactured homes seeking a residence homestead exemption must provide:
 a copy of the statement of ownership for the manufactured home issued by the Texas Department of Housing and Community Affairs showing that the applicant is the owner of the manufactured home;
 a copy of the sales purchase agreement, other applicable contract or agreement or payment receipt showing that the applicant is the purchaser of the manufactured home; <u>or</u>
a sworn affidavit (see last page) by the applicant indicating that:
a) the applicant is the owner of the manufactured home;
b) the seller of the manufactured home did not provide the applicant with the applicable contract or agreement; and
c) the applicant could not locate the seller after making a good faith effort.
SECTION 8: Additional Information
If you own other residential property in Texas, please list the county(ies) of location.

SECTION 9: Affirmation and Signature

residence homestead outside Texas; and

NOTICE REGARDING PENALTIES FOR MAKING OR FILING AN APPLICATION CONTAINING A FALSE STATEMENT: If you make a false statement on this form, you could be found guilty of a Class A misdemeanor or a state jail felony under Penal Code Section 37.10.

I,	, swear or affirm the following:				
,	Printed Name of Property Owner				
1.	that each fact contained in this application is true and correct;				
2.	that I meet the qualifications under Texas law for the residence homestead exemption for which I am applying;				
3.	 that I do not claim an exemption on another residence homestead or claim a residence homestead exemption on a residence homestead outside Texas; and 				
4.	4. that I have read and understand the Notice Regarding Penalties for Making or Filing an Application Containing a False Statement.				
sig her	1 e				
	Signature of Property Owner/Applicant or Authorized Representative Date				
indiv	E: If an individual other than the property owner/applicant is filing this form as a representative, on behalf of the property owner/applicant, the dual shall provide evidence of his or her capacity and authority to represent the property owner/applicant in this matter. In signing the affirmation in the representative as a representative of the property owner/applicant, the representative is swearing or affirming that:				
•	each fact contained in this application is true and correct;				
•	the property owner/applicant meets the qualifications under Texas law for the residence homestead exemption requested;				
•	the property owner/applicant does not claim an exemption on another residence homestead or claim a residence homestead exemption on a				

• the representative has read and understands the Notice Regarding Penalties for Making or Filing an Application Containing a False Statement.

- * Under Tax Code Section 11.43(m), a person who receives a general residence homestead exemption in a tax year is entitled to receive the age 65 or older exemption in the next tax year on the same property without applying for it, if the person becomes 65 years old in that next year as shown by certain information in the appraisal district records or information the Texas Department of Public Safety provided to the appraisal district under Transportation Code Section 521.049.
- ** Disclosure of your social security number (SSN) may be required and is authorized by law for the purpose of tax administration and identification of any individual affected by applicable law. Authority: 42 U.S.C. § 405(c)(2)(C)(i); Tax Code Section 11.43(f). Except as authorized by Tax Code Section11.48(b), a driver's license number, personal identification certificate number or social security number provided in this application for an exemption filed with your county appraisal district is confidential and not open to public inspection under Tax Code Section 11.48(a).
- *** An email address of a member of the public could be confidential under Government Code Section 552.137; however, by including the email address on this form, you are affirmatively consenting to its release under the Public Information Act.
- **** An individual who is an eligible survivor for purposes of Government Code Chapter 615 as determined by the Employees Retirement System of Texas.

Affidavits for Residence Homestead Exemption

Complete the appropriate affidavit below (see section 7 of this form) and have it notarized. Attach the completed and notarized affidavit to this application.

AFFIDAVIT FOR OWNER/APPLICANT WHO IS AGE	65 OR OLDER AND OWNERSHIP INTEREST NOT OF RECORD
STATE OF TEXAS COUNTY OF	
Before me, the undersigned authority, personally appearedwho, being by me duly sworn, deposed as follows:	
"My name is	and I am applying for a residence homestead exemption for
property owners who are age 65 or older. I am 65 years of age or older in this affidavit; and all of the facts in it are true and correct. I am an ow	r; I am fully competent to make this affidavit; I have personal knowledge of the facts represented in this application although I am not identified as an reperty records of the county where my residence homestead is located.
Further, Affiant sayeth not."	SUBSCRIBED AND SWORN TO before me this, the
Signature of Affiant	day of ,
	Notary Public in and for the State of Texas
	My Commission expires:
AFFIDAVIT FOR OWNER/APPLICANT WHO HAS QUALI STATE OF TEXAS COUNTY OF	FYING DISABILITY AND OWNERSHIP INTEREST NOT OF RECORD
Before me, the undersigned authority, personally appearedwho, being by me duly sworn, deposed as follows:	
in this affidavit; and all of the facts in it are true and correct. I am an ow	and I am applying for a residence homestead exemption for am fully competent to make this affidavit; I have personal knowledge of the facts one of the property identified in this application although I am not identified as an or operty records of the county where my residence homestead is located.
Further, Affiant sayeth not."	SUBSCRIBED AND SWORN TO before me this, the
Signature of Affiant	day of ,
	Notary Public in and for the State of Texas
	My Commission expires:
	RITTEN OWNERSHIP DOCUMENT FOR MANUFACTURED HOME
STATE OF TEXAS COUNTY OF	
Before me, the undersigned authority, personally appearedwho, being by me duly sworn, deposed as follows:	
	and I am applying for a residence homestead exemption as y competent to make this affidavit; I have personal knowledge of the facts in this the manufactured home identified in this application. The seller of the manufactured I could not locate the seller after making a good faith effort.
Further, Affiant sayeth not."	SUBSCRIBED AND SWORN TO before me this, the
Signature of Affiant	day of ,
	Notary Public in and for the State of Texas
	My Commission expires: