

# 2019 APPLICATION FOR RESIDENTIAL HOMESTEAD EXEMPTION

Para asistencia en Español  
llame al (817)284-4063



Return completed application to:  
TARRANT APPRAISAL DISTRICT  
EXEMPTION DIVISION  
PO BOX 185579  
FORT WORTH, TX 76181-0579

TAD USE ONLY – RECEIPT STAMP HERE

ACCOUNT #:  
PIDN:  
CLASS CODE:

PLEASE PROVIDE THE FOLLOWING:
DAYTIME PHONE #:
DATE OF BIRTH:
*EMAIL ADDRESS:

**There is no fee for filing an application. Failure to complete all applicable parts and attach all required documentation may result in denial of the exemption.**

**DUTY TO NOTIFY:** If the chief appraiser grants the exemption(s), you do not need to reapply annually. You must reapply if the chief appraiser requires you to do so, or if you want the exemption to apply to property not listed on this application. You must notify the chief appraiser in writing before May 1 of the year after your right to this exemption ends.

### STEP 1 – THIS APPLICATION APPLIES TO THIS PROPERTY

Legal description and street address	Deed filing information (date, volume and page or instrument number)
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#### MANUFACTURED HOMES:

For a manufactured home to qualify for a residence homestead, applicant must provide:

- 1) 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;
- 2) A copy of the purchase contract or payment receipt showing that the applicant is the purchaser of the manufactured home; or
- 3) A sworn affidavit 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 an applicable purchase contract or agreement; and
  - c. The applicant could not locate the seller after making a good faith effort.

### STEP 2 – MARITAL STATUS

Is the owner of the property:     a Married Couple     a Single Person     Separate Individuals?  
If separate individuals, each occupant must make application. % Ownership Interest \_\_\_\_\_

### STEP 3 – OWNER INFORMATION

Do you own and live in the property for which you are seeking this residence homestead exemption?    Yes \_\_\_\_ No \_\_\_\_  
On what day did you begin occupying this property as your principal residence? (MM/DD/YYYY) \_\_\_\_\_  
Are you claiming a homestead exemption on another property?    Yes \_\_\_\_ No \_\_\_\_  
If 'Yes', please provide the address of the other property: \_\_\_\_\_  
Do you own other residential property in Texas?    Yes \_\_\_\_ No \_\_\_\_  
If yes, please list the county(ies) and address(es) of location: \_\_\_\_\_  
If the property is in Tarrant Appraisal District, the exemption will be removed and applied to this property. If it is not, documentation from the other appraisal district must be sent with this application verifying removal.

Cooperative Housing: Do you have an exclusive right to occupy this property because you own stock in a cooperative housing corporation?    Yes \_\_\_\_ No \_\_\_\_  
If yes, state name of cooperative housing corporation? \_\_\_\_\_  
Is any portion of the property for which you are claiming a residence homestead 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 occupy as your principal residence: \_\_\_\_\_ acres

**IMPORTANT:** Pursuant to Tax Code Section 11.43(j), you are required to furnish a copy of the following: Texas driver's license or Personal Identification Certificate. **Section 11.43, subsection (n) prohibits a chief appraiser from allowing a homestead exemption unless the addresses on the required forms of identification match the address for which the exemption is claimed.** Please indicate that you request that the chief appraiser waive the requirement that the address on the application and your driver's license correspond because:

- Is an active duty member of the armed forces of the United States or the spouse of an active duty member and the applicant includes with the application a copy of the applicant's or spouse's military identification card and a copy of a utility bill for the property subject to the claimed exemption in the applicant's or spouse's name; or
- Holds a driver's license issued under Section 521.121c or 521.1211, Transportation Code, and includes with the application a copy of the application for that license provided to the Texas Department of Transportation.
- I am a resident of a facility that provides health, infirmity, or aging.    Facility Name \_\_\_\_\_ Phone \_\_\_\_\_
- I am certified for participation in the address confidentiality program administered by the Office of the Texas Attorney General under Subchapter C, Chapter 56, Code of Criminal Procedure.

The chief appraiser is required to keep the information confidential and not open to public inspection, except to appraisal office employees who appraise property as authorized by Section 11.48(b), Tax Code.

**STEP 4 – CHECK THE EXEMPTIONS THAT APPLY TO YOU**

- GENERAL RESIDENCE HOMESTEAD** (Tax Code Section 11.13(a), (b)): You may qualify for this exemption if: (1) you owned this property on Jan. 1; (2) you occupied it as your principal residence on Jan. 1; and (3) you and your spouse do not claim a residence homestead exemption on any other property.
- AGE 65 OR OLDER** (Tax Code Section 11.13(c), (d)): You may qualify for this exemption if you are 65 years of age or older. 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.
- DISABLED PERSON** (Tax Code Section 11.13(c), (d)): To qualify for this exemption, you must be under a disability for purposes of payment of disability insurance benefits under federal Old-Age, Survivors and Disability Insurance Act . To establish your eligibility, attach copies of either: (1) currently dated disability letters from two different doctors [you may obtain form #5205 at [www.tad.org](http://www.tad.org) or call 817-284-4063]; or (2) a currently dated award letter from Social Security Administration that states the date you became disabled. [To obtain a copy from Social Security, telephone 1-800-772-1213.] You may receive this exemption in addition to the exemptions provided in 11.13(a), (b), General Residence Homestead. You cannot receive an age 65 or older exemption if you receive this exemption.
- 100% DISABLED VETERAN** (Tax Code Section 11.131(b)): You may qualify for this exemption if you are a disabled veteran who receives from the United States Department of Veterans Affairs or its successor: (1) 100 percent disability compensation due to a service- connected disability; and (2) a rating of 100 percent disabled or individual unemployability. Attach a copy of your current award letter or other document from the Department of Veterans Affairs showing 100% compensation due to a service-connected disability, including effective date of service connected disability and a rating of 100% disabled or of individual unemployability. This exemption is immediate upon qualification for the applicable portion of the tax year. 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? Yes \_\_\_ No \_\_\_
- SURVIVING SPOUSE OF DISABLED VETERAN WHO QUALIFIED OR WOULD HAVE QUALIFIED FOR THE 100% DISABLED VETERAN** (Tax Code Section 11.131(c), (d)): You may qualify for this exemption 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 and: (1) you have not remarried since the death of the disabled veteran and (2) the property was your residence homestead when the disabled veteran died and remains your residence homestead.  
Name of Deceased Spouse \_\_\_\_\_ Date of Death \_\_\_\_\_
- OVER-55 SURVIVING SPOUSE OF A PERSON WHO RECEIVED THE OVER-65 OR DISABLED PERSON** (Tax Code Section 11.261(j)): provides for continuance of established tax ceilings on the county, county college and city for a spouse of a deceased individual who qualified for the disabled person or over-65 exemption. The ISD is only applicable for the spouse of a deceased individual who qualified for the over-65 exemption or would have applied and qualified in the year of the spouse's death. You qualify for an extension of the over 65 or disability exemptions if you were 55 years of age or older on the date your spouse died and your spouse was receiving the age 65 or disabled person exemption on this residence. You cannot receive this exemption if you receive an exemption under Tax Code Section 11.13(d).  
Name of Deceased Spouse \_\_\_\_\_ Date of Death \_\_\_\_\_
- DONATED RESIDENCE HOMESTEAD OF PARTIALLY DISABLED VETERAN** (Tax Code Section 11.132(b)): You may qualify for this exemption if you are a disabled veteran with a disability rating of less than 100 percent. An exemption from taxation of a percentage of the appraised value of the disabled veteran's residence homestead equal to the disabled veteran's disability rating if the residence homestead was donated to the disabled veteran by a charitable organization: (1) at no cost to the disabled veteran; or (2) at some cost to the disabled veteran in the form of a cash payment, a mortgage, or both in an aggregate amount that is not more than 50 percent of the good faith estimate of the market value of the residence homestead made by the charitable organization as of the date the donation is made. **Please attach all documents that support your request. Percent Disability Rating \_\_\_\_\_**
- SURVIVING SPOUSE OF DISABLED VETERAN WHO QUALIFIED FOR THE DONATED RESIDENCE HOMESTEAD** (Tax Code Section 11.132(c), (d)): You may qualify for this exemption 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 and: (1) you have not remarried since the death of the disabled veteran and (2) the property was your residence homestead when the disabled veteran died and remains your residence homestead. **Please attach all documents to support your request.**
- SURVIVING SPOUSE OF MEMBER OF ARMED FORCES KILLED IN ACTION** (Tax Code Section 11.133(b), (c)): You may qualify for this exemption if you are the surviving spouse of a member of the United States armed services who is killed in action and you have not remarried since the death of the member of the armed services. **Please attach all documents to support your request.**
- SURVIVING SPOUSE OF A FIRST RESPONDER KILLED WHILE ON DUTY** (Tax Code Section 11.134(b)): You may qualify for this exemption if you are the surviving spouse of a first responder who is killed or fatally injured in the line of duty. The surviving spouse is entitled to an exemption from taxation of the total appraised value of the surviving spouse's residence homestead if the surviving spouse: (1) is an eligible survivor for purposes of Chapter 615, Government Code, as determined by the Employees Retirement System of Texas under that chapter; and (2) has not remarried since the death of the first responder. **Please attach all documents to support your request.**

**Tax Limitation Exemption Transfer.** Place an 'x' or check mark in the space beside the type of tax limitation or surviving spouse exemption transfer you seek from your previous residence homestead and the address of the last residence homestead to the right:

- |   |   |
|---|---|
| <input type="checkbox"/> Tax limitation (Tax Code Section 11.26(h) or 11.261 (h))                               | <b>Address of last residence homestead:</b> |
| <input type="checkbox"/> 100% Disabled Veteran's Exemption (Tax Code Section 11.131(d))                         | Address _____                               |
| <input type="checkbox"/> Donated Residence Homestead of Partially Disabled Veteran (Tax Code Section 11.132(d)) | City _____                                  |
| <input type="checkbox"/> Member of Armed Forces Killed in Action (Tax Code Section 11.133c)                     | State & Zip _____                           |
| <input type="checkbox"/> First Responder Killed While on Duty (Tax Code Section 11.134)                         | County _____                                |

**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.** By signing this application you state that each fact contained in this application is true and correct; (2) that I/the property owner meet(s) 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 in Texas or claim a residence homestead exemption on a residence homestead outside Texas; and (4) that have read and understand the *Notice Regarding Penalties for Making or Filing an Application Containing a False Statement.*"

Applicant's Signature \_\_\_\_\_ Date Signed \_\_\_\_\_