

LIMITED INCOME SENIOR EXEMPTION APPLICATION for PERSON AGE 65 and OLDER

The Limited Income Senior Exemption provides an additional reduction on Orange County General and Municipal taxes (city taxes).

There are two types of senior exemptions:

- Limited Income Senior Regular: at least one owner of the property must be 65 as of January 1 of the year in which you are applying and must meet the *household* income limits set annually by the Florida Dept. of Revenue (contact the Property Appraiser's office for the income limitation).
- Limited Income Senior Plus: must meet the requirements above and have continuously resided on the property for 25 years or more. The property market value must be under \$250,000 to qualify. This exempts the property owner from Orange County General taxes only. **In addition to the application form, each owner applying must also fill out the "Affidavit of Continued Residency"**

INCOME DOCUMENTATION IS REQUIRED TO QUALIFY FOR THIS EXEMPTION All individuals who reside on the property must submit income proof.

- If you filed income tax returns for the prior year, or plan to, you must provide a copy of those returns with your application.
- If you DO NOT file income tax returns then you must provide copies of 1099s for all income received, for example, Social Security, pension funds, IRA distribution, interest on banks accounts, etc.
- If you do not have any income, or if members of your household did not receive any income from the prior year, you must fill out and submit an additional affidavit. Please contact the Property Appraiser for the affidavit.

Application Instructions

▶▶▶▶ Return Application by MARCH 1 and return your income documents by JUNE 1 ◀◀◀◀

Box 1: List the owners of the property and the mailing address.

Box 2: List the physical address of the property only if different from the mailing address.

Box 3: List all individuals who reside on the property (even if they don't own the property). Indicate if federal IRS tax returns are filed; provide birthdate and Social Security numbers. If there are numerous residents and more space is required, list individuals on the back of the application.

Box 4: Indicate the annual amount of income in each box that applies. If you file income tax returns, only indicate your adjusted gross income. *All household residents must submit proof of income.*

Box 5: Read the affirmation, sign and date the form and provide a daytime phone number.

For additional questions, please contact the Orange County Property Appraiser at: 407-836-5044

LIMITED INCOME SENIOR EXEMPTION APPLICATION for PERSON AGE 65 and OLDER

Parcel ID: Tax Year:

Please fill out the application completely, read the affirmation in Box 5 and sign at the bottom.

▶▶▶▶ Return application by MARCH 1 and return your income documents by JUNE 1 ◀◀◀◀

CHECK THOSE THAT APPLY:

- I am 65 or older as of January 1 of this year and my household income meets the statutory limitation.
(Must provide income documents for all household members.)
- I am 65 or older as of January 1 and I have resided on the property for 25 years, or more, and my property market value is below \$250,000.
(Must fill out and have notarized the enclosed affidavit to apply for this Senior Plus exemption)

BOX 1 OWNER(S) NAME and MAILING ADDRSS

BOX 2 PROPERTY ADDRESS, IF DIFFERENT

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BOX 3 HOUSEHOLD MEMBERS: list all the individuals who reside on the property with you even if they don't own the property.

Print Names of Residents	Do you File Tax Returns?	Date of Birth Month/Day/Year	Social Security Number
	<input type="checkbox"/> YES <input type="checkbox"/> NO		
	<input type="checkbox"/> YES <input type="checkbox"/> NO		
	<input type="checkbox"/> YES <input type="checkbox"/> NO		

BOX 4 TOTAL ANNUAL HOUSEHOLD INCOME (All Household Members)

Earned Income from working:	\$	Social Security benefits:	\$
Rents:	\$	IRA distributions:	\$
Dividends, Capital Gains, Annuities:	\$	Pension plans:	\$
Adjusted Gross Income on IRS tax return:	\$	Other income :	\$

Total Household Income: \$ _____

Box 5 Affirmation: read, sign and date

I hereby certify that I am 65 years of age or older as of January 1 of the year for which this exemption is applied and the total prior year's adjusted gross income for all persons residing, excluding renters or boarders, on the property as of January 1 does not exceed the statutory limitation. I understand that Florida Statute 196.131(2) provides that any person who knowingly and willfully gives false information for the purpose of claiming any exemption is guilty of a misdemeanor of the first degree, punishable by a term of imprisonment not exceeding 1 year or a fine not to exceed \$5,000 or both. Further, under penalty of perjury, I declare that I have read the foregoing sworn statement of household information and it is correct to the best of my knowledge.

Applicant Signature

Date: _____

Daytime Phone: ()

OCPA:

EX 11/17

RICK SINGH, CFA
ORANGE COUNTY PROPERTY APPRAISER

200 S. Orange Avenue, Suite 1700 • Orlando, Florida 32801-3438 • (407) 836-5044



AFFIDAVIT OF CONTINUED RESIDENCY / LIMITED INCOME SENIOR PLUS EXEMPTION

This form is for those applying for the Limited Income Senior Plus exemption who have lived on the property continuously for 25 years or more.

Each property owner must complete an affidavit

I _____ have continuously resided at
Name of applicant

_____ since, _____.
Address *Year of residence*

I have not resided at or claimed any residency based benefits on any other property in any other State, County, Taxing Jurisdiction, or US Territory since _____.
Year

I understand that Section 196.131(2), Florida Statutes, provides that any person who knowingly and willingly gives false information for the purpose of claiming homestead exemption is guilty of a misdemeanor of the first degree, punishable as provided in Section 775.080, Florida Statutes, or by a fine not exceeding \$5,000 or both.

Print Name

Affiant Signature

Completed by Notary

STATE OF FLORIDA
COUNTY OF ORANGE

I hereby certify that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, personally appeared, _____ who is personally known to me or who has produced _____ as identification.

Driver's License number: _____

WITNESS my hand and official seal in the State and County last aforesaid this _____ day of _____, 20____.
My commission expires on _____.

NOTARY PUBLIC