

# Instructions for Filing Your Application for Exemptions by Mail

## Application Instructions

You may complete and mail the enclosed application, file in person, or link, and use the user login and password provided in the enclosed letter. The deadline to file is March 1. If you have questions, please contact Customer Service at (407) 836-5044.

## Required Documentation

When filing by mail, please submit copies of the following items:

If you drive, Florida Driver License or non-drivers, a Florida identification card and one of the following:

- Florida Vehicle Registration
- Florida Voter Registration
- Recorded Orange County Declaration of Domicile (obtained from the Comptroller's Office)

Note: The Declaration of Domicile is only required if you do not have a vehicle or voter registration.

## Social Security Number:

Required for all residing owners and their spouses (even if the spouse does not own or reside on the property).

## Property held in trust:

A copy of the trust agreement must be submitted.

## Permanent Residence Card (Green Card):

A copy of the front and back is required for all applicants that are not United States citizens.

**IF you had homestead exemption on another property located within Florida, complete the DR501T and submit along with this application.**

ORIGINAL APPLICATION FOR AD VALOREM TAX EXEMPTION																																																																																															
ORANGE COUNTY, FLORIDA		Tax Year: 200X	Date: 04-01-200X																																																																																												
Property ID Number: 11-22-33-444-55-000																																																																																															
Name: DOE JOHN DOE JANE 1234 E. SUNNY ST. ORLANDO, FL 32801		Legal Description: LOT 1 BLOCK A SUNNY ACRES SUBDIVISION																																																																																													
Improvement Type: Number of Units:		Ownership Information: Instrument Nbr: 550/0123 Book: Page: 550/0123 Date Recorded: Type of Deed: WARRANTY DEED																																																																																													
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Select Type of Exemption - Permanent Florida residency required as of January 1!																																																																																															
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<small>NOTE: I hereby authorize this agency to obtain information necessary to determine my eligibility for the exemption(s) applied for. If all information is not received by March 1st, your application will be processed for whatever exemptions you qualify for on that date. I hereby make application for the exemptions indicated and affirm that I do qualify for same under Florida Statutes. I am a permanent resident of the State of Florida and own and occupy the property described above. I understand that section 196.012(1), Florida Statutes provides that any person who knowingly and voluntarily gives false information for the purpose of claiming homestead exemption is guilty of a misdemeanor of the first degree punishable by a term of imprisonment not exceeding 1 year or a fine not exceeding \$5,000 or both. Further, under penalties of perjury, I declare that I have read the foregoing application and the facts in it are true. Please be sure to include copies of required documentation. (See brochure for details)</small>																																																																																															
John Doe Signature		Jane Doe Signature																																																																																													

## Completing the Application

**VERIFY INFORMATION-** Review the preprinted information on top of the application for accuracy.

**SELECT TYPE OF EXEMPTION-** Select all exemptions for which you are applying.

**PROOF OF RESIDENCE FOR ALL OWNERS-** This section must be completed by every owner. Owners not residing on the property must submit only their address. Write each owner(s) name and complete the following:

1. Any portion leased or rented – additional structures or duplexes.
2. Date of Occupancy – date you moved into this property.
3. Date of Residence – date you last became a Florida resident.
4. Marital Status/Relationship – marital status (married, single, widow/widower, divorced, separated) / relationship (husband, wife or other)
5. Driver License Number - number and issue date of your license or ID card (must attach a copy).
6. Driver License State – the state your driver license was issued.
7. Date of Birth – date you were born.
8. Vehicle Registration/State – the license plate tag number or the title VIN number and the state your vehicle is registered in (must attach a copy, if applicable).
9. Florida Voter Registration # – the number off your voter registration card and the issue date
10. U.S. Citizen - circle Yes or No.
11. Declaration of Domicile – the instrument (DOC) number where the affidavit is recorded in the county records (must attach a copy, if applicable).
12. Resident Alien Card Number – the number on your Permanent Residence Card and the date it was issued (must attach a copy, if applicable).
13. Current Employer/Phone Number – your current employer and telephone number.
14. Home Phone – your home phone number, including area code.
15. Social Security Number – your number.
16. Non Owner Spouse SSN – your spouse's social security number even if your spouse is not on the title or does not reside on the property.
17. Address listed on your last IRS return – list the address you used when you filed your last income tax return.
18. Did you have homestead last year – circle Yes or No. If yes and homestead was on a different property please complete the enclosed DR501T application, 'Transfer of Homestead Assessment Difference'.
19. Your address last year - if #18 is yes, the address where you lived or had a homestead exemption prior to moving into this home.
20. Address of additional property owned in or out of Florida – list the address of any other prop erty you own.
21. Address of owners not residing on property – the address of each property owner not applying for the exemption.

**RICK SINGH**

200 S. Orange Ave. • Suite 1700 • Orlando, FL 32801 • (407) 836-5044

• Visit our website at [www.ocpafl.org](http://www.ocpafl.org) for more information •

Rev. 1/13

# ORIGINAL APPLICATION FOR AD VALOREM TAX EXEMPTION

**ORANGE COUNTY, FLORIDA**

Tax Year: **2019**

Date:

Type: New / Change / Additional

Situs Address:

Property ID Number:

Name:

Legal Description:

Improvement Type:

Number of Units:

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

Ownership Information	
Percent Ownership:	Instrument Nbr:
Date of Deed:	Book / Page:
Date Recorded:	
Type of Ownership:	
Type of Deed:	

**Select Type of Exemption - Permanent Florida residency required as of January 1**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> \$25,000 Homestead Exemption  | <input type="checkbox"/> \$5,000 Service Connected Exemption  | <input type="checkbox"/> Spouse of Service Connected Total and Permanent Disability/First Responder <i>(Documentation Required)</i> |
| <input type="checkbox"/> \$500 Widow's Exemption       | <input type="checkbox"/> \$5,000 Service Connected Spouse Exemption                                       | <input type="checkbox"/> Exemption for Disabled Veterans Confined to Wheelchairs <i>(Documentation Required)</i>                    |
| <input type="checkbox"/> \$500 Widower's Exemption     | <input type="checkbox"/> Total and Permanent Disability Exemption <i>(Documentation Required)</i>         | <input type="checkbox"/> Total and Permanent Disability Exemption Quadriplegics <i>(Documentation Required)</i>                     |
| <input type="checkbox"/> \$500 Disability Exemption    | <input type="checkbox"/> Service Connected Total and Permanent Disability <i>(Documentation Required)</i> |   |
| <input type="checkbox"/> \$500 Blind Persons Exemption |   |   |

Proof of residence for all owners	Name:	Name:	Name:
1. Any portion leased or rented?	Yes                      No		
2. Date of Occupancy (moved in)			
3. Date of Residence (to Florida)			
4. Marital Status/Relationship	/	/	/
5. Driver License Number	Issue Date:	Issue Date:	Issue Date:
6. Driver License State			
7. Date of Birth			
8. Vehicle Registration / State	/	/	/
9. Florida Voter Registration #	Issue Date:	Issue Date:	Issue Date:
10. U.S. Citizen?	Yes                      No	Yes                      No	Yes                      No
11. Declaration of Domicile	Residency Date:	Residency Date:	Residency Date:
12. Resident Alien Card Number	Issue Date:	Issue Date:	Issue Date:
13. Current Employer/Phone Number			
14. Home Phone			
15. Social Security Number			
16. Non Owner Spouse SSN			
17. Address listed on your last IRS return			
18. Did you have homestead last year?	Yes                      No	Yes                      No	Yes                      No
19. Your address last year			
20. Address of additional property owned in or out of Florida			
21. Address of owners not residing on property			

NOTE: I hereby authorize this agency to obtain information necessary to determine my eligibility for the exemption(s) applied for. If all information is not received by March 1st, your application will be processed for whatever exemptions you qualify for on that date.

I hereby make application for the exemptions indicated and affirm that I do qualify for same under Florida Statutes. I am a permanent resident of the State of Florida and I own and occupy the property described above. I understand that section 196.131(2), Florida Statutes provides that any person who knowingly and willfully gives false information for the purpose of claiming homestead exemption is guilty of a misdemeanor of the first degree punishable by a term of imprisonment not exceeding 1 year or a fine not exceeding \$5,000 or both. Further, under penalties of perjury, I declare that I have read the foregoing application and the facts in it are true.

**\*Please be sure to include copies of required documentation. (See brochure for details)**

Signature

Signature

Signature

Deputy Initials

**This application must be filed with the Property Appraiser on or before March 1<sup>st</sup>.**

**The information contained in this application will be provided to the Department of Revenue and the Department and/or the property appraisers are authorized to provide this information to any state in which the applicant has previously resided, pursuant to 196.121, Florida Statutes. Social Security numbers will remain confidential pursuant to sections 193.114(6) and 193.074, Florida Statutes.**

**Notice: A tax lien can be imposed on your property pursuant to 196.161, Florida Statutes.**

**Section 196.161 (1) provides:**

(1) (a) When the estate of any person is being probated or administered in another state under an allegation that such person was a resident of that state and the estate of such person contains real property situate in this state upon which homestead exemption has been allowed pursuant to s. 196.031 for any year or years within 10 years immediately prior to the death of the deceased, then within 3 years after the death of such person the property appraiser of the county where the real property is located shall, upon knowledge of such fact, record a notice of tax lien against the property among the public records of that county, and the property shall be subject to the payment of all taxes exempt thereunder, a penalty of 50 percent of the unpaid taxes for each year, plus 15 percent interest per year, unless the circuit court having jurisdiction over the ancillary administration in this state, determines that the decedent was a permanent resident of this state during the year or years an exemption was allowed, whereupon the lien shall not be filed or, if filed, shall be canceled of record by the property appraiser of the county where the real estate is located. (b) In addition, upon determination by the property appraiser that for any year or years within the prior 10 years a person who was not entitled to a homestead exemption was granted a homestead exemption from ad valorem taxes, it shall be the duty of the property appraiser making such determination to serve upon the owner a notice of intent to record in the public records of the county a notice of tax lien against any property owned by that person in the county, and such property shall be identified in the notice of tax lien. Such property, which is situated in this state, shall be subject to the taxes exempted thereby, plus a penalty of 50 percent of the unpaid taxes for each year and 15 percent interest per annum. However, if a homestead exemption is improperly granted as a result of a clerical mistake or omission by the property appraiser, the person improperly receiving the exemption shall not be assessed penalty and interest. Before any such lien may be filed, the owner so notified must be given 30 days to pay the taxes, penalties and interest.



# Transfer of Homestead Assessment Difference

## Steps for filling out your DR501T

### Part 1.

Fill in all blocks. Enter your name, address, phone #, 15 digit parcel ID number, County, and the total number of Owners/Homestead Applicants at this address.

The 15 digit parcel ID number can be found on our website [www.ocpafl.org](http://www.ocpafl.org) under either the Property Search or Map Search.

### Part 2.

Enter all the information from your previous homestead. Note, it is very important that this information is accurate. List the county in which it was located, the parcel ID number or other identifying number used by the former Property Appraiser to identify the parcel, the date you sold the property or no longer used it as your homestead, the street address, City, State and Zip.

List all co-applicants for the previous homestead property that are applying for this transfer. (Do not list someone that did not own and live at the former homestead.) Attach an additional page if necessary.

List any and all owners from the former homestead who are not applying as a co-applicant for this transfer.

Did any of these owners remain in the former homestead? Check the box either Yes or No.

### Part 3.

The applicant and *all* co-applicants must sign and date.

### Still have questions?

[Visit our portability FAQ](#)

or, call us at

**(407) 836-5044**

for more information.



### TRANSFER OF HOMESTEAD ASSESSMENT DIFFERENCE

Attachment to Original Application for Homestead Tax Exemption

Section 193.155, Florida Statutes

DR-501T  
R. 12/08  
Rule 12D-16.002  
Florida Administrative Code  
Effective 11/12

If you have applied for a new homestead exemption and are entitled to transfer a homestead assessment difference from a previous homestead, file this form with your property appraiser by **March 1**. Co-applicants transferring from a different homestead must fill out a separate form.

#### COMPLETED BY APPLICANT

##### PART 1. New Homestead

Applicant name	<u>John Doe</u>	Phone 1 <u>(407) 836-5044</u>	Phone 2 <u>(407) 836-5045</u>
New address	<u>1234 E. Sunny Street Orlando, FL 32801</u>	Parcel ID <u>11-22-33-4444-55-678</u>	County <u>Orange</u>
		Total number of applicants <u>2</u>	

##### PART 2. Previous Homestead

Previous address	<u>5678 W. Lake Drive Orlando, FL 32801</u>	Parcel ID <u>77-88-99-0000-11-222</u>	County <u>Orange</u>
		Date sold or no longer used as your homestead <u>4/1/13</u>	

Co-applicants who owned and lived at the previous homestead	Owners of the previous homestead not moving to new homestead *
1. <u>Jane Doe</u>	1. <u>Mike Smith</u>
2. _____	2. _____
3. _____	Did any of the owners stay in the previous homestead? <input type="checkbox"/> yes <input checked="" type="checkbox"/> no

##### PART 3. Signature of Applicant and All Co-applicants \*

I affirm that I qualify for the homestead exemption assessment transfer from the previous homestead above. Under penalties of perjury, I declare that I have read this application and the facts in it are true.

<u>John Doe</u>	<u>4/5/13</u>	<u>Jane Doe</u>	<u>4/5/13</u>
Signature, applicant	Date	Signature, co-applicant 1	Date
_____	_____	_____	_____
Signature, co-applicant 2	Date	Signature, co-applicant 3	Date

Add pages, if needed.

#### COMPLETED BY PROPERTY APPRAISER OF NEW HOMESTEAD

_____	_____	_____
Signature, property appraiser or deputy	County	Date

If the previous homestead was in a different county, add your contact information. Send this form with a copy of the Original Application for Homestead Tax Exemption (Form DR-501) to the property appraiser's office in the county of the previous homestead.

Contact Address	Email
_____	_____
_____	Phone 1 _____
_____	Phone 2 _____
_____	Fax _____

#### INSTRUCTIONS TO PROPERTY APPRAISER OF PREVIOUS HOMESTEAD

Based on your county's records, complete and return the Certificate of Transfer of Homestead Assessment Difference (Form DR-501RVSH) to the contact at the property appraiser's office above by April 1 or within 2 weeks after you receive this Transfer of Homestead Assessment Difference (Form DR-501T), whichever is later.

\*Use additional pages, if needed.

### After completion of Part 3, return this form:

- In person at 200 S. Orange Avenue, SunTrust Bank Building, 17th floor, Orlando
- By mail at Orange County Property Appraiser  
200 S. Orange Avenue, Suite 1700  
Orlando, FL 32801
- By Fax (407) 836-5949

[www.ocpafl.org](http://www.ocpafl.org)



# TRANSFER OF HOMESTEAD ASSESSMENT DIFFERENCE

Attachment to Original Application for Homestead Tax Exemption

Section 193.155, Florida Statutes

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If you have applied for a new homestead exemption and are entitled to transfer a homestead assessment difference from a previous homestead, file this form with your property appraiser by **March 1**.

Co-applicants transferring from a different homestead must fill out a separate form.

## COMPLETED BY APPLICANT

### PART 1. New Homestead

Applicant name	Phone 1 _____ Phone 2 _____
New address	Parcel ID _____ County _____ Total number of applicants _____

### PART 2. Previous Homestead

Previous address	Parcel ID _____ County _____ Date sold or no longer used as your homestead _____
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Co-applicants who owned and lived at the previous homestead 1. _____ 2. _____ 3. _____	Owners of the previous homestead not moving to new homestead 1. _____ 2. _____ Did any of the owners stay in the previous homestead? <input type="checkbox"/> yes <input type="checkbox"/> no
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### PART 3. Signature of Applicant and All Co-applicants

I affirm that I qualify for the homestead exemption assessment transfer from the previous homestead above.  
Under penalties of perjury, I declare that I have read this application and the facts in it are true.

_____ Signature, applicant	_____ Date	_____ Signature, co-applicant 1	_____ Date
_____ Signature, co-applicant 2	_____ Date	_____ Signature, co-applicant 3	_____ Date

Add pages, if needed.

## COMPLETED BY PROPERTY APPRAISER OF NEW HOMESTEAD

_____ Signature, property appraiser or deputy	_____ County	_____ Date
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If the previous homestead was in a different county, add your contact information. Send this form with a copy of the Original Application for Homestead Tax Exemption (Form DR-501) to the property appraiser's office in the county of the previous homestead.

Contact Address	Email _____ Phone 1 _____ Phone 2 _____ Fax _____
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