



Application for Residence Homestead Exemption

Property Tax
Form 50-114

Appraisal District's Name

Phone (area code and number)

Address, City, State, ZIP Code

This document must be filed with the appraisal district office in the county in which your property is located. Do not file this document with the office of the Texas Comptroller of Public Accounts. Location and address information for the appraisal district office in your county may be found at comptroller.texas.gov/propertytax/references/directory/cad.

GENERAL INSTRUCTIONS: This application is for use in claiming residence homestead exemptions pursuant to Tax Code Sections 11.13, 11.131, 11.132, 11.133 and 11.432. The exemptions apply only to property that you own and occupy as your principal place of residence.

WHERE TO FILE: This document, and all supporting documentation, must be filed with the appraisal district in the county in which your property is located. Location and address information for the appraisal district office in your county may be found at comptroller.texas.gov/propertytax/references/directory/cad.

APPLICATION DEADLINES: You must file the completed application with all required documentation beginning Jan. 1 and no later than April 30 of the year for which you are requesting an exemption. If you qualify for the age 65 or older or disabled persons exemption or the exemption for donated homesteads of partially disabled veterans, you must apply for the exemption no later than the first anniversary of the date you qualify for the exemption.

Pursuant to Tax Code Section 11.431, you may file a late application for a residence homestead exemption, including an exemption under Tax Code Sections 11.131, 11.132 and 11.133 after the deadline for filing has passed if it is filed not later than one year after the delinquency date for the taxes on the homestead.

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 in this application. You must notify the chief appraiser in writing if and when your right to this exemption ends.

OTHER IMPORTANT INFORMATION

Pursuant to Tax Code Section 11.45, after considering this application and all relevant information, the chief appraiser may request additional information from you. You must provide the additional information within 30 days of the request or the application is denied. For good cause shown, the chief appraiser may extend the deadline for furnishing the additional information by written order for a single period not to exceed 15 days.

State the Year for Which You are Applying

Tax Year

Date when you began occupying the property as your principal residence

Do you own the property for which you are seeking an exemption?

Yes

No

STEP 1: Ownership Information

Name of Property Owner

Mailing Address

City, State, ZIP Code

Phone (area code and number)

Driver's License, Personal ID Certificate, or Social Security Number*

Birth Date**

Percent Ownership in Property

Other Owner's Name(s) (if applicable)

Birth Date** of Spouse (if applicable)

Other Owner's Percent Ownership

* Pursuant to Tax Code Section 11.43(f), you are required to furnish this information. A driver's license number, personal identification certificate number, or social security account number provided in an application for an exemption filed with a chief appraiser is confidential and not open to public inspection. The information may not be disclosed to anyone other than an employee or agent of the appraisal district which appraises property or performs appraisal services for the appraisal district, except as authorized by Tax Code Section 11.48(b).

** Tax Code Section 11.43(m) allows a person who receives a general homestead exemption in a tax year to receive the age 65 or older exemption for an individual 65 years of age or older in the next tax year on the same property without applying for the age 65 or older exemption if the person becomes 65 years of age in that next year as shown by information in the records of the appraisal district that was provided to the appraisal district by the individual in an application for a general residence homestead exemption.

STEP 2: Property Information

Address, City, State, ZIP Code _____

Legal Description (if known) _____

Appraisal District Account Number (if known) _____

Number of acres (not to exceed 20) used for residential occupancy of the structure if both the structure and the land have identical ownership _____ acres

MANUFACTURED HOME: Make, model and identification number _____

STEP 3: Exemption Types and Tax Limitation

Brief descriptions of qualifications for the exemptions listed are provided under each listing; however, to obtain complete information, you should consult the Tax Code. You may call the appraisal district to determine what homestead exemptions are offered by your taxing units if a list has not been provided by the appraisal district.

GENERAL RESIDENCE HOMESTEAD EXEMPTION (Tax Code Section 11.13): You may qualify for this exemption if for the current year and, if filing a late application, for the year for which you are seeking an exemption: (1) you owned this property on January 1; (2) you occupied it as your principal residence on January 1; and (3) you and your spouse do not claim a residence homestead exemption on any other property.

DISABLED PERSON EXEMPTION (Tax Code Section 11.13(c), (d)): You may qualify for this exemption if you are under a disability for purposes of payment of disability insurance benefits under Federal Old-Age, Survivors, and Disability Insurance. You can't receive an age 65 or older exemption if you receive this exemption.

AGE 65 OR OLDER EXEMPTION (Tax Code Section 11.13(c), (d)): You may qualify for this exemption if you are 65 years of age or older. You may qualify for the year in which you become age 65. You cannot receive a disability exemption if you receive this exemption.

SURVIVING SPOUSE OF INDIVIDUAL WHO QUALIFIED FOR AGE 65 OR OLDER EXEMPTION UNDER TAX CODE Section 11.13(d) (Tax Code Section 11.13(q)): You may qualify for this exemption if: (1) your deceased spouse died in a year in which he or she qualified for the exemption under Tax Code Section 11.13(d); (2) you were 55 years of age or older when your deceased spouse died; and (3) the property was your residence homestead when your deceased spouse died and remains your residence homestead. You can't receive this exemption if you receive an exemption under Tax Code Section 11.13(d).

Name of Deceased Spouse _____

Date of Death _____

100% DISABLED VETERANS EXEMPTION (Tax Code Section 11.131): 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 unemployment.

SURVIVING SPOUSE OF DISABLED VETERAN WHO QUALIFIED FOR THE 100% DISABLED VETERAN'S EXEMPTION (Tax Code Section 11.131): 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 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.

Name of Deceased Spouse _____

Date of Death _____

DONATED RESIDENCE HOMESTEAD OF PARTIALLY DISABLED VETERAN (Tax Code Section 11.132): You may qualify for this exemption 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. Please attach all documents to support your request.

Percent Disability Rating _____

SURVIVING SPOUSE OF DISABLED VETERAN WHO QUALIFIED FOR THE DONATED RESIDENCE HOMESTEAD EXEMPTION (Tax Code Section 11.132): 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 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.

Name of Deceased Spouse _____

Date of Death _____

SURVIVING SPOUSE OF MEMBER OF ARMED FORCES KILLED IN ACTION (Tax Code Section 11.133): 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.

Check if you seek to transfer a tax limitation from your previous residence homestead as provided by Tax Code Section 11.26(h) or 11.261(h).

Address of last residence homestead: _____

Previous Residence Address, City, State, ZIP Code _____

AFFIDAVITS: Complete and have Notarized, if Applicable (See Step 4).

AFFIDAVIT FOR PERSONS WHO ARE AGE 65 OR OLDER OR HAVE QUALIFYING DISABILITIES

STATE OF TEXAS
COUNTY OF _____

Before me, the undersigned authority, personally appeared _____,
who, being by me duly sworn, deposed as follows:

“My name is _____. I am over 18 years of age and I am otherwise fully competent to make this affidavit. I have personal knowledge of the facts contained herein and all of same are true and correct. I meet the qualifications for a residence homestead exemption under Tax Code Section 11.13(c) or (d) and am not specifically identified on a deed or other appropriate instrument recorded in the applicable real property records as an owner of the residence homestead identified in this application. I am a legal owner of the property with a community property interest.

Further, Affiant sayeth not.”

Signature of Affiant

SUBSCRIBED AND SWORN TO before me this, the

_____ day of _____, _____

Notary Public in and for the State of Texas

My Commission expires: _____

AFFIDAVIT FOR PERSONS WHO ARE AGE 65 OR OLDER OR HAVE QUALIFYING DISABILITIES

STATE OF TEXAS
COUNTY OF _____

Before me, the undersigned authority, personally appeared _____,
who, being by me duly sworn, deposed as follows:

“My name is _____. I am over 18 years of age and I am otherwise fully competent to make this affidavit. I have personal knowledge of the facts contained herein and all of same are true and correct. I meet the qualifications for a residence homestead exemption under Tax Code Section 11.13(c) or (d) and am not specifically identified on a deed or other appropriate instrument recorded in the applicable real property records as an owner of the residence homestead identified in this application. I am a legal owner and own _____ percent of the property.

Further, Affiant sayeth not.”

Signature of Affiant

SUBSCRIBED AND SWORN TO before me this, the

_____ day of _____, _____

Notary Public in and for the State of Texas

My Commission expires: _____

MANUFACTURED HOME AFFIDAVIT

STATE OF TEXAS
COUNTY OF _____

Before me, the undersigned authority, personally appeared _____,
who, being by me duly sworn, deposed as follows:

“My name is _____. I am over 18 years of age and I am otherwise fully competent to make this affidavit. I have personal knowledge of the facts contained herein and all of same are true and correct. I am the owner of the manufactured home identified in the foregoing exemption application. The seller of the manufactured home did not provide me with a purchase contract and I could not locate the seller after making a good faith effort.

Further, Affiant sayeth not.”

Signature of Affiant

SUBSCRIBED AND SWORN TO before me this, the

_____ day of _____, _____

Notary Public in and for the State of Texas

My Commission expires: _____