Application for Residence Homestead Exemption

Property Tax
Form 50-114

Appraisal District's Name

Phone *(area code and number)*

Appraisal District Address, City, State, ZIP Code

Website address (if applicable)

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 are to 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 are to 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 before May 1 of the year after 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 a residence homestead exemption? . . . . . ☐ Yes ☐ No

STEP 1: Property Owner/Applicant Information

The applicant is the following type of property owner:

☐ Single Adult ☐ Married Couple ☐ Other (e.g., individual who owns 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***

% 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***

% Ownership Interest

☐ Place an "X" or check mark in the box if the ownership interest(s) identified above is less than 100 percent (100%) in the property for which you are claiming a residence homestead exemption. Provide on a separate sheet the following information for each additional person who has an ownership interest in the property: property owner's name; birth date; driver's license, personal ID certificate, or social security number; primary phone number; email address; and percentage (%) of ownership interest in the property.

Is any portion of the property for which you are claiming a residence homestead exemption income producing? . . . . . ☐ Yes ☐ No

If you answered "Yes," please indicate the percentage of the property that is income producing: _____ %

STEP 2: Property that Qualifies for Residence Homestead Exemption

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:

Physical Address (i.e. street address, not P.O. Box), City, County, ZIP Code

Legal Description *(if known)*

Appraisal District Account Number *(if known)*

Applicant's mailing address (if different from the physical address of the principal residence provided above):

Number of acres (or fraction of an acre, not to exceed 20 acres) you own and occupy as your principal residence: _____ acres

If your principal residence is a manufactured home, provide the make, model and identification number:

Make

Model

ID Number

If the ownership of your property is in stock in a cooperative housing corporation, do you have an exclusive right to occupy the unit at the physical address identified above? . . . . . ☐ Yes ☐ No

STEP 3: Types of Residence Homestead Exemptions

Place an "x" or check mark beside the type of residence homestead exemption for which you are applying for the property described above in Step 2. 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), (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.

☐ **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 cannot 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. 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.

☐ **SURVIVING SPOUSE OF INDIVIDUAL WHO QUALIFIED FOR AGE 65 OR OLDER EXEMPTION** (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 cannot 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(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.

☐ **SURVIVING SPOUSE OF DISABLED VETERAN WHO QUALIFIED OR WOULD HAVE QUALIFIED FOR THE 100% DISABLED VETERAN'S EXEMPTION** (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 _____

☐ **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 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(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.

Name of Deceased Spouse _____ Date of Death _____

☐ **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.

STEP 4: Tax Limitation or Exemption Transfer

Place an "x" or check mark beside the type of tax limitation or surviving spouse exemption transfer you seek from your previous residence homestead:

☐ Tax limitation (Tax Code Section 11.26(h) or 11.261(h))

☐ 100% 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 Forces Killed in Action (Tax Code Section 11.133(c))

Address of last residence homestead:

Previous Residence Address, City, State, ZIP Code _____

STEP 5: Application Documents

Attach a copy of your driver's license or state-issued personal identification certificate. The address listed on your driver's license or state-issued personal identification certificate must correspond to the address of the property for which an exemption is claimed in this application. In certain cases, you are exempt from these requirements or the chief appraiser may waive the requirements.

Indicate if you are exempt from the requirement to provide a copy of your driver's license or state-issued personal identification certificate:

☐ I am a resident of a facility that provides services related to health, infirmity, or aging.

Name and Address of Facility _____

☐ 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.

Indicate if you request that the chief appraiser waive the requirement that the address of the property for which the exemption is claimed corresponds to the address listed on your driver's license or state-issued personal identification certificate:

☐ I am an active duty member of the armed services of the United States or the spouse of an active duty member. Attached are a copy of my military identification card or that of my spouse and a copy of a utility bill for the property subject to the claimed exemption in my name or my spouse's name.

☐ I hold a driver's license issued under Section 521.121(c) or 521.1211, Transportation Code. Attached is a copy of the application for that license to the Texas Department of Transportation.

For an AGE 65 OR OLDER OR DISABLED PERSON exemption:
In addition to the information identified above, an applicant for an age 65 or older or disabled exemption who is not specifically identified on a deed or other instrument recorded in the applicable real property records as an owner of the residence homestead must provide an affidavit (see last page) or other compelling evidence establishing the applicant's ownership of an interest in the homestead.

For a 100% DISABLED VETERAN exemption:
In addition to the information identified above, an applicant for a 100% disabled veteran's exemption or the surviving spouse of a disabled veteran who qualified for the 100% disabled veteran's exemption must provide documentation from the United States 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.

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

1) a copy of the statement of ownership and location 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 (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 a purchase contract; **and**
   c) the applicant could not locate the seller after making a good faith effort.

STEP 6: Affirmation and Signature

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 in Texas or claim a residence homestead exemption on a residence homestead outside Texas; and (4) that I have read and understand the *Notice Regarding Penalties for Making or Filing an Application Containing a False Statement*."

sign here ▶ _____
Signature of Property Owner/Applicant or Person Authorized to Sign the Application Date
(Only a person with a valid power of attorney or court-ordered designation is authorized to sign the application on behalf of the property owner.)

* 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 Section 521.049 of the Transportation Code.

** 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 § 11.43(f). Except as authorized by Tax Code Section 11.48(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.

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

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 appeared _____,
who, 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; I am fully competent to make this affidavit; I have personal knowledge of the facts in this affidavit; and all of the facts in it are true and correct. I am an owner of the property identified in this application although I am not identified as an owner on a deed or other appropriate instrument recorded in the real property records of the county where my residence homestead is located.

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 OWNER/APPLICANT WHO HAS QUALIFYING DISABILITY AND OWNERSHIP INTEREST NOT OF RECORD

STATE OF TEXAS
COUNTY OF _____

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

"My name is _____ and I am applying for a residence homestead exemption for property owners with qualifying disabilities. I am over 18 years of age; I am fully competent to make this affidavit; I have personal knowledge of the facts in this affidavit; and all of the facts in it are true and correct. I am an owner of the property identified in this application although I am not identified as an owner on a deed or other appropriate instrument recorded in the real property records of the county where my residence homestead is located.

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 OWNER/APPLICANT WITHOUT WRITTEN OWNERSHIP DOCUMENT FOR MANUFACTURED HOME

STATE OF TEXAS
COUNTY OF _____

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

"My name is _____ and I am applying for a residence homestead exemption as an owner of a manufactured home. I am over 18 years of age; I am fully competent to make this affidavit; I have personal knowledge of the facts in this affidavit; and all of the facts in it are true and correct. I am the owner of the manufactured home identified in this 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: _____