

LATE FILE INDIVIDUAL AFFIDAVIT FOR AD VALOREM TAX EXEMPTION

HOMES FOR THE AGED

Section 196.1975, Florida Statutes

DR-504S R. 11/21 Rule 12D-16.002 F.A.C. Effective 11/21 Page 1 of 2

| PART A. Completed by each resident. | | | | | | |
|---|----------------|-----------------------------------|---------|-------|-------|------|
| Name Spouse's name | | | | | | |
| | | | Resid | dent | Sp | ouse |
| Tax Year 20 Building name | | | Yes | No | Yes | |
| 1. Did you live in the unit on January 1 of the tax year and consider it your permanent home? | | | | | | |
| 2. Have you claimed homestead exemption on any other property for the current year? | | | | | | |
| 3. Were you at least 62 years old on January 1 of this year? | | | | | | |
| 4. Are you totally and permanently disabled? If yes, attach documentation of your disability. | | | | | | |
| PART B. Completed by residents who wish to claim the low-income exemption (s. 196.1975(4), F.S.) and whose incomes are at or below the income limit. Couples should include the incomes of both persons. | | | | | | |
| Are you a totally and permanently disabled veteran as defined in s. 196.081, F.S.? If yes, do not include your income below. | | | | | | |
| 6. Do you survive a spouse you lived with at his or her death and who would have answered yes to question 1 and also to 3 or 4? If yes, include the incomes of both persons. | | | | | | |
| Gross Income | | | | | | |
| Earned income | | Rents | | | | |
| Income from investments | | Dividends | | | | |
| Social Security benefits | | Annuities | | | | |
| Income from retirement plans | | Trusts | | | | |
| Pensions | | Estates | | | | |
| Interest | | Inheritances | | | | |
| Royalties | | Direct and indirect gifts | | | | |
| Gains from disposition of appreciated property | | Other: | | | | |
| | | TOTAL GROSS INCO | ME | | _ | |
| PART C. Completed by each resident. | | | | | | |
| I certify all information on this application, incl of the tax year. | uding any atta | achments, is true, correct, and i | n effec | ct on | Janua | ry 1 |
| Under penalties of perjury, I declare that I have read the foregoing affidavit, and that the facts stated in it are true | | | | | | |
| Resident | Date | Spouse | | | Da | te |

INSTRUCTIONS

This affidavit must be completed by residents who reside in a home for the aged, per section 196.1975(4), F.S. This affidavit is an attachment to the *Ad Valorem Tax Exemption Application and Return for Nonprofit Homes for the Aged* (Form DR-504HA, incorporated by reference in Rule 12D-16.002, F.A.C.). The applicant must submit both the application and all affidavits to the county property appraiser.

The Department publishes the annual maximum income limitation in the publication, *Cost of Living*, available at https://floridarevenue.com/property/Documents/CostofLivingAdjust.pdf. These income limitations do not apply to totally and permanently disabled veterans who meet the requirements of s. 196.081, F.S.

Need Help?

In Florida, local governments are responsible for administering property tax. The best resource for assistance is the property appraiser in the county where the property is located. Find websites for county property appraisers at: