



APPLICATION FOR RESIDENTIAL HOMESTEAD EXEMPTION (see back for General instructions)

IMPORTANT INFORMATION FOR APPLICANTS

*Pursuant to Tax Code §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 of the appraisal office who appraises property, except as authorized by Tax Code §11.48(b).

**Tax Code §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.

REQUIRED DOCUMENTS MUST ACCOMPANY APPLICATION! See Page 2 and 3 for instructions.

_____ Date you began occupying the property as your principal residence: _____

_____ Do you own the property for which you are seeking an exemption: Yes No

APPLICANT'S INFORMATION:

**Birth Date:		*Driver's License # or ID #:		*Social Security #:	
Phone #:		Mobile or Cell Phone #:		Percent Ownership:	
Other Owner's Names(s) if any:		Birth Date of Spouse (if applicable):		Other Owner's Percent Ownership:	

LEGAL DESCRIPTION:

ACCOUNT NUMBER: _____

JURISDICTIONS: _____

PROPERTY ADDRESS: _____

NOTE: If property address is not correct, please show correct address here: _____

of acres used for residential purposes: _____ **ACS**

MOBILE HOMES: **Size:** _____ **Year:** _____
Make: _____ **Model:** _____
Serial #: _____ **Label #:** _____

(year) **GENERAL RESIDENTIAL HOMESTEAD EXEMPTION (Tax Code §11.13):** You may qualify for this exemption if (1) you owned this property on January 1; (2) you occupied it as your principal residence on January 1 & (3) you and your spouse do not claim a residence homestead exemption on any other property.

(year) **AGE 65 OR OLDER EXEMPTION (Tax Code §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.

(year) **DISABLED PERSON EXEMPTION (Tax Code §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.

(year) **SURVIVING SPOUSE OF INDIVIDUAL WHO QUALIFIED FOR AGE 65 OR OLDER EXEMPTION UNDER TAX CODE §11.13(d), §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 §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 §11.13(d).

<i>Deceased Spouse's Name</i>	<i>Date of Death</i>
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(year) **100% DISABLED VETERANS EXEMPTION (Tax Code §11.131):** You may qualify for this exemption if you are a disabled veteran who receives from the United States Department of Veteran's 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.

Branch of Service	Disability Rating	%	Age	Serial #
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Attach a copy of your current award letter, "VA tax letter" or other document from the United States Department of Veterans Affairs showing 100 percent disability compensation due to a service-connected disability and a rating of 100 percent disabled or of individual unemployability.

(year) **SURVIVING SPOUSE OF DISABLED VETERAN WHO QUALIFIED FOR THE 100% DISABLED VETERAN'S EXEMPTION (Tax Code §11.131):** You may qualify for this exemption if you were married to a disabled veteran who qualified for an exemption under Tax Code §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.

<i>Deceased Spouse's Name</i>	<i>Date of Death</i>
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(year) **SURVIVING SPOUSE OF A MEMBER OF THE ARMED FORCES KILLED IN ACTION (Tax Code §11.132, Version 2):** You may qualify for this exemption if you are the surviving spouse of a member of the United States armed services who was 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.

Deceased Spouse's Name	Date of Death
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(year) **DONATED RESIDENCE HOMESTEAD OF PARTIALLY DISABLED VETERAN (Tax Code §11.132, Version 1):** You may qualify for this exemption if you are a disabled veteran with a disability rating of less than 100% 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.

Disability Rating	%
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(year) **SURVIVING SPOUSE OF DISABLED VETERAN WHO QUALIFIED FOR THE DONATED RESIDENCE HOMESTEAD EXEMPTION (Tax Code §11.132, Version 1):** You may qualify for this exemption if you were married to a disabled veteran who qualified for an exemption under Tax Code §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.

Deceased Spouse's Name	Date of Death
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Yes No Pursuant to Tax Code §11.26(h) or 11.261(h) will you be transferring a tax ceiling from your last home? If so, **you must request a "Tax Ceiling Certificate"** from the Appraisal District in which your last home was located and submit it to this Appraisal District.

ADDRESS OF LAST RESIDENCE HOMESTEAD:

Street Address	City	ST	Zip
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Cooperative Housing Residents Only:

Yes No Do you have an exclusive right to occupy this unit because you own stock in a cooperative housing corporation?

Brief descriptions of qualifications for exemptions listed are provided under each listing; however, to obtain complete information, you should consult the Tax Code. For assistance, you may contact your appraisal district or the Comptroller's Property Tax Assistance Division. If you would like to know the homestead exemptions offered by your taxing units, please contact the Jim Wells County Appraisal District office by phone at (361)668-9656 Ext #12, in person at 1600 E Main St Ste #100B or by mail at PO Box 607, Alice, TX 78333-0607.

ATTACH REQUIRED DOCUMENTS with ALL applications:

1. A copy of the applicant's 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.

A. Please 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 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.

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

Name and Address of Facility

B. Please 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:

1. 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.

2. I hold a driver's license issued under Section 521.121 or 521.1211 (peace officer), Transportation Code. Attached is:

a copy of the application for that license from the Texas Department of Transportation.

For an AGE 65 OR OLDER OR DISABLED PERSON exemption: if applicant is not specifically identified on a deed or other instrument recorded in the applicable real property records as an owner of the residence homestead, the applicant MUST provide:

2. An affidavit (see page 3) or other compelling evidence establishing the applicant's ownership of an interest in the homestead in addition to the information identified above.

For a 100% DISABLED VETERAN exemption the applicant **MUST provide:**

- 3. Documentation from the United States Department of Veterans Affairs or its successor indicating that the veteran received 100% disability compensation due to a service-connected disability and had a rating of 100% disabled or individual unemployability in addition to the information identified above.

ALSO include with applications for Manufactured Homes:

- 4. A copy of the statement of ownership and location (SOL) 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.
- 5. A copy of the purchase contract or payment receipt showing that the applicant is the purchaser of the manufactured home
OR
 A sworn affidavit (see page 4) by the applicant indicating that:
 1. The applicant is the owner of the manufactured home
 2. The seller of the manufactured home did not provide the applicant with a purchase contract **AND**
 3. The applicant could not locate the seller after making a good faith effort.

By signing this application, you state that:

- the facts in this application are true and correct
- that you do not claim a residence homestead exemption on another residence homestead in Texas and
- that you do not claim a residence homestead exemption on a residence homestead outside of Texas.

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 Section 37.10, Penal Code.*

Your signature on this application constitutes a sworn statement that you have read and understand the *Notice Regarding Penalties for Making or Filing an Application Containing a False Statement*.

*Only a person with a valid power of attorney or other court-ordered designation is authorized to sign the application on behalf of the property owner.

Applicant's Signature		Date
Printed Name		
Notary Public or CAD Employee		Date

AFFIDAVITS – Complete and have notarized, if applicable

AGE 65 OR OLDER/DISABLED EXEMPTION AFFIDAVIT (community property interest)

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 **OR** _____% interest in to the property

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
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.

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: _____

GENERAL INSTRUCTIONS:

This application is for use in claiming general homestead exemptions pursuant to Tax Code §11.13, §11.131
and §11.432. The exemptions apply to your residence homestead that you own and occupy as your principal
residence. You must furnish all information and documentation required by the application.

WHERE TO FILE:

File the completed application and all required documents with the Jim Wells County Appraisal District in
person at 1600 E Main St Ste #100B or by mail at PO Box 607, Alice, TX 78333-0607. It must not be filed
with the office of the Comptroller of Public Accounts.

APPLICATION DEADLINES:

For homestead exemptions other than the age 65 and over or disabled person homestead exemptions provided in
Tax Code §11.13(c) and (d), you must file the completed application with all required documentation between
January 1 and no later than April 30 of the year for which you are requesting an exemption.

If you qualify for an age 65 and over homestead exemption provided in Tax Code §11.13(c) or (d), you must
apply for the exemption no later than the first anniversary of the date you qualify for the exemption.

If you qualify for a disabled person homestead exemption provided in Tax Code §11.13(c) or (d), you must
apply for the exemption no later than the first anniversary of the date you qualify for the exemption.

Pursuant to Tax Code §11.431, you may file a late application for a residence homestead exemption, including a
100% disabled veteran residence homestead exemption, 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.

WHEN NEW APPLICATION IS REQUIRED:

Pursuant to Tax Code §11.43(c), if the chief appraiser grants your exemption(s), you do not need to reapply
annually. However, the chief appraiser may require you to file a new application to confirm your current
qualification for the exemption(s) by delivering to you a written notice that a new application is required,
accompanied by an appropriate application form. Also, for most exemptions, you must file a new application to
claim an exemption that you qualify for in the future if you do not currently qualify.

DUTY TO NOTIFY:

You have a duty to notify the chief appraiser when your entitlement to any exemption ends.

OTHER IMPORTANT INFORMATION:

Pursuant to Tax Code §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.