

KIM HASTIE
REVENUE COMMISSIONER
MOBILE COUNTY



Affidavit for Homestead Exemption

Parcel Number: 0 2 - - - - - . - - - - - Key# _____

Owner Name(s): _____

Property Address: _____

(Street Address)

(City)

(State)

(Zip Code)

Mailing Address: Same as above? YES NO *If no, please complete the section below:*

(Street Address)

(City)

(State)

(Zip Code)

Date of 1st Occupancy: _____

(Month/Day/Year)

Phone Number: _____ Phone Number : _____

Email Address: _____

I hereby claim the homestead exemptions provided by Section 40-9-19 (a)(1), (b), and (c) of the *Code of Alabama 1975*. I affirm that I, as owner, began occupying the property described above as my primary residence on the date of first occupancy as specified above. I also attest that I have no active homestead exemptions for any other property in this or any other county or state. Further, I understand that knowingly and willfully giving false information for the purpose of claiming a homestead exemption or for the purpose of assisting another person to claim a homestead exemption is punishable by penalty of twice the amount of any ad valorem tax which would have been due, retroactive for up to 10 years plus interest at a rate of 15 percent per year from the date the tax would have been due.

Homeowner Signature: _____

Printed Name: _____ Date: _____

—CLERK SIGNATURE AS WITNESS OR NOTARY REQUIRED—

Sworn and subscribed before me on this _____ day of _____ 20____ Seal:

Signature Notary Public: _____

Commission Expires: _____

(Month/Day/Year)

Clerk Signature: _____ Date: _____

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Exemption Qualification Questionnaire

Owner Name(s): _____ Key# _____

- I. Does any person applying for this homestead exemption currently have homestead at another residence? YES NO *If yes, please list previous address:*

(Any other homestead must be canceled before this application can be processed.)

- II. Is this residence a manufactured home (trailer)? YES NO

- III. Are you 65 or older? YES NO Date of Birth: _____
If yes, please answer below:

- a. Are you still required to file a Federal Income Tax Return? YES NO

If you are required to file a Federal Income Tax Return, is your combined Taxable Income (taxpayer and spouse) \$12,000 or less? YES NO

- b. Are you still required to file a State Income Tax Return? YES NO

If you are required to file a State Income Tax Return, is your Adjusted Gross Income \$12,000 or less? YES NO

- IV. Are you retired because of PERMANENT and TOTAL Disability? YES NO

If yes, please attach one of the following qualifying documentation options below:

- a. **Two (2) separate physician's letters**
- b. **Social Security Administration Disability documentation**
- c. **Department of Veterans Affairs (100% service connected or unemployable)**
- d. **State of Alabama Retirement documents**
- e. **Department of Revenue Certification**
- f. **Private company Disability Annuity documents**

- V. Are you blind, as defined by the *Code of Alabama 1975*, Section 1-1-3 (vision acuity of 20/200 or less)? YES NO *(If yes, attach supporting documents.)*

Homeowner Signature: _____ Date: _____

Clerk Initials: _____ Date: _____