

STATE OF _____
PARISH/COUNTY OF _____

HOMESTEAD EXEMPTION AFFIDAVIT

BEFORE ME, the undersigned authority, Notary Public in and for the aforesaid Parish/County and State, personally came and appeared,

Name: _____

Spouse Name: _____

Address: _____

Phone Number: _____

herein after "Appearer," who, after being duly sworn, did depose and say:

I. HOMESTEAD EXEMPTION PROPERTY

Appearer owns and occupies the following described property, to-wit:

[INSERT LEGAL DESCRIPTION]

If the property described above is unimproved land, Appearer hereby provides the following land data:

Copy of Survey Attached: Yes _____ No _____

Survey Recording Information: Instrument # _____

Total Number of Acres: _____

Dimensions: _____ x _____ x _____ x _____

Check the Appropriate Land Use: Cleared _____ Timber _____ Marsh _____ Misc. _____

II. TRANSFER OR WAIVER OF HOMESTEAD EXEMPTION (If Applicable)

Appearer currently claims homestead exemption on the following described property:

Municipal Address: _____

Lot/Tract Number: _____ Subdivision Name: _____

Section: _____ Township: _____ Range: _____

Assessment Number: _____ Parish: _____

Initial the following choice:

1. _____ Appearer hereby waives Appearer's right to claim a homestead exemption to the property described in Section I above.
2. _____ Appearer hereby terminates the existing claim for homestead exemption and transfers Appearer's claim for homestead exemption to the property described in Section I above and extended in accordance with the provisions of Louisiana Constitution Article 7 Section 20 and Louisiana law by the choices selected in Section III and/or Section IV below.

III. STANDARD HOMESTEAD EXEMPTION

Appearer hereby claims homestead exemption on the property described in Section I above in accordance with the provisions of Louisiana Constitution Article 7 Section 20 and Louisiana law, which said homestead exemption is extended by initialing the following appropriate choice(s):

1. _____ Standard
2. _____ With Use Value
3. _____ Surviving Spouse

4. _____ Trust
5. _____ Usufruct
6. _____ Owned in Indivision; Percentage of Ownership _____%
7. _____ Bond for Deed (prior to June 20, 2003)
8. _____ Additional Homestead Exemption for a veteran with a service-connected disability rating of one hundred (100%) percent by the United States Department of Veterans Affairs in accordance with the provisions of Louisiana Constitution Article 7 Section 21(K).

IV. SPECIAL ASSESSMENT EXEMPTION

Appearer hereby claims a special assessment in addition to homestead exemption claimed in Section III on the property described in Section I in accordance with the provisions of Louisiana Constitution Article 7 Section 18 and Louisiana law, which said special assessment is extended by initialing the following appropriate choice(s):

1. _____ Special Assessment Freeze for persons 65 years of age or older
2. _____ Veteran with a service-connected disability rating of fifty (50%) percent by the United States Department of Veterans Affairs
3. _____ Member of the Armed Forces of the United States or Louisiana National Guard, who was either killed in action, missing in action, or prisoner of war for a period exceeding ninety (90) days
4. _____ Person permanently and totally disabled

V. REQUIRED DOCUMENTATION

Appearer hereby certifies Appearer has attached a copy of the Settlement Statement, Act of Sale or any document transferring title, Appraisal, and Insurance Declaration Page to assist the assessor in providing the necessary data to determine the fair market value of the above described property.

VI. GENERAL PROVISIONS

Appearer hereby certifies he or she is not claiming any other property as his or her homestead for purposes of this homestead exemption.

Pursuant to La. R.S. 47:2327, this form shall be confidential and solely used by the Ascension Parish Assessor, the governing authority, and the Louisiana Tax Commission for the purpose of administering this statute.

SIGNATURE AND VERIFICATION

I declare under the penalties for filing false reports that this Homestead Exemption Affidavit has been examined by me and to the best of my knowledge and belief is a true, correct, and complete return. If the return is prepared by someone other than the taxpayer, his declaration is based on all the information relating to the matters required to be reported in the return of which he has knowledge.

Print Name:

Print Name:

SWORN TO AND SUBSCRIBED before me, Notary, this _____ day of _____, 20____.

NOTARY PUBLIC

PRINT NAME:_____

NOTARY #:_____