MILAM APPRAISAL DISTRICT P O BOX 769 CAMERON, TX 76520

Phone:	254-697-6638	Granted:	Date://_	
Fax:	254-697-8059	Denied:	Date://	

APPLICATION FOR RESIDENTIAL HOMESTEAD EXEMPTION FOR

Property ID: Property Type:	Geo ID:
Legal Description: Step 1: Owner's name and address (attach sheets if need	ded)
	Telephone:
	Birth Date**:
	Spouse's Birth Date:
Tax Year:	Do you own the property for which you are seeking an exemption?Yes[] No[]
	(if any): Other Owner's Percent Ownership:
Driver's License Number, Personal ID Certificate, or Social Sec	urity Number*: Occupancy Move-In Date:
Step 2: Describe your property	
Give street address if different from above, or legal description if no str	reet address
	: Identification #:
Number of acres (not to exceed 20) used for residential occupancy of Acres	the structure if both the structure and the land have identical ownership
Step 3: Check exemptions that apply to you	
	ed under each listing; however, to obtain complete information, you should consult the Tax Code. If your units served by the appraisal district with all residential homestead exemptions each taxing unit offers, ptions are offered by your taxing units.
GENERAL RESIDENCE HOMESTEAD EXEMPTION /Tax	c Code §11.13): You may qualify for this exemption if for the current year and, if filing a late application,
	u owned this property on January 1; (2) you occupied it as your principal residence on January 1; and
	(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 I Check if you will transfer a tax ceiling from your last home	Disability Insurance. You can't receive an age 65 or older exemption if you receive this exemption.
Check if you will transfer a tax ceiling from your last nome	Address of last residence homestead
AGE 65 OR OLDER EXEMPTION (Tax Code \$11.13(c), (d	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 of	exemption if you receive this exemption.
Check if you will transfer a tax ceiling from your last home .	Yes [] No [] Address of last residence homestead
SUBVIVING SPOUSE OF INDIVIDUAL WHO OUGH ISIED	FOR AGE 65 OR OLDER EXEMPTION UNDER TAX CODE §11.13(d) (Tax Code §11.13(g)): 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; your residence homestead. You can't receive this exemptio	and (3) the property was your residence homestead when your deceased spouse died and remains up if you receive an exemption under Tay Code \$11,13(d)
Name of Deceased Spouse: Check if you will transfer a tax ceiling from your last home.	Date of Death: Address of last residence homestead
Check if you will transfer a tax ceiling from your last home .	Yes[] No[]
	1.131): 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) percent disabled or individual unemployability.	100 percent disability compensation due to a service-connected disability; and (2) a rating of 100
SURVIVING SPOUSE OF DISABLED VETERAN WHO OF	UALIFIED 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 vete your residence homestead.	eran and (2) the property was your residence homestead when the disabled veteran died and remains
Name of Deceased Spouse:	Date of Death:
DONATED RESIDENCE HOMESTEAD OF PARTIALLY D	DISABLED VETERAN (Tax Code Section 11.132, Version 1): You may qualify for this exemption if you
	00 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:	
SUBVIVING SPOUSE OF DISARI ED VETERAN WHO OF	UALIFIED FOR THE DONATED RESIDENCE HOMESTEAD EXEMPTION (Tax Code Section 11.132,
Version 1): You may qualify for this exemption if you were n	married to a disabled veteran who qualified for an exemption under Tax Code Section 11.132 at the time
	e death of the disabled veteran and (2) the property was your residence homestead when the disabled
veteran died and remains your residence homestead. Pleas Name of Deceased Spouse:	se attach all documents to support your request Date of Death:
SURVIVING SPOUSE OF MEMBER OF ARMED FORCES	S KILLED IN ACTION (Tax Code Section 11.132, Version 2): You may qualify for this exemption if you
	armed services who is killed in action and you have not remarried since the death of the member of the

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- * Pursuant to Tax Code Section 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 Section 11.48(b).
- ** Tax Code Section 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.

Step 4: 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.

ALSO SEE INSTRUCTIONS AND OTHER IMPORTANT INFORMATION FOLLOWING THE APPLICATION

ALSO SEE INSTRUCTIONS AND O	THER IMPORTANT INFORMATI	ON FOLLOWING T	HE APPLICATION		
Please indicate if you are exempt fro	m the requirement to provide a c	opy of your driver's li	cense or state-issued	personal identification	on certificate:
[] I am a resident of a facility tha	t provides services related to hea	alth, infirmity, or aging	J.		
Name and Address of Facility_				 	
[] I am certified for participation i Chapter 56, Code of Criminal	n the address confidentiality prog Procedure.	gram administered by	the Office of the Texa	as Attorney General	under Subchapter C,
Please indicate if you request that th corresponds to the address listed on				which the exemption	n is claimed
	the armed services of the United spouse and a copy of a utility bil				
[] I hold a driver's license issued Texas Department of Transpo	under §521.121 or §521.1211, T rtation.	ransportation Code.	Attached is a copy of	the application for th	nat license from the
Step 5: Answer if applies					
COOPERATIVE HOUSING RESIDENTS: Do you have an exclusive right to occupy this unit because you own stock in a cooperative housing corporation? Yes [] No []					I
Check if late Application for homestead exertion You must have met all of the company to the com	mption for prior tax year µalifications checked above to re	eceive the prior year	exemption.		
Step 6: Sign and date the appli	cation				
By signing this application, you sta another residence homestead in T NOTICE REGARDING PENALTIE statement on this form, you cou Your signature on this application of an Application Containing a False	exas, and that you do not claim a S FOR MAKING OR FILING AN Id be found guilty of a Class A constitutes a sworn statement tha	residence homestea APPLICATION CON misdemeanor or a	ad exemption on a resi ITAINING A FALSE S state jail felony unde	idence homestead on TATEMENT: If you rection 37.10, Pe	outside of Texas. make a false nal Code.
I,, have not (Printed Name of Property Owner)					
claimed another residence homest		her state, and all info	rmation provided in thi	is application is true	and correct.
Authorized Signature:		Date	<u>.</u>		
*Only a person with a valid power of att	orney or other court-ordered designati			of the property owner.	
The following table lists each taxing jurisd	ction that offers residential homestea	d exemptions:			
3,7	STATE MANDATED	LOCAL OPTION	STATE MANDATED	LOCAL OPTION	STATE MANDATED
JURISDICTION	HOMESTEAD	HOMESTEAD	OVER 65 HS	OVER 65 HS	DISABILITY

The following table lists each taxing jurisdiction that offers residential homestead exemptions:					
JURISDICTION	STATE MANDATED HOMESTEAD	LOCAL OPTION HOMESTEAD	STATE MANDATED OVER 65 HS	LOCAL OPTION OVER 65 HS	STATE MANDATED DISABILITY
CITY OF CAMERON CITY OF ROCKDALE THORNDALE CITY MILAM COUNTY BARTLETT I S D	15.000		10,000	3,000 3,000 5,000 6,000	10,000
BUCKHOLTS ISD CAMERON I S D GAUSE I S D HOLLAND ISD	15,000 15,000 15,000 15,000	5,000	10,000 10,000 10,000 10,000	0.000	10,000 10,000 10,000 10,000
LEXINGTON ISD MILANO ISD ROSEBUD ISD ROCKDALE ISD ROGERS ISD	15,000 15,000 15,000 15,000 15,000	5,000	10,000 10,000 10,000 10,000 10,000	6,000 6,000	10,000 10,000 10,000 10,000 10,000
THORNDALE IS D DONAHOE WATERSHED ELMCREEK WATERSHED	15,000		10,000	3,000 5,000	10,000

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AFFIDAVIT FOR PERSONS WHO A	ARE AGE 65 OR OLDER OR HAVE QUALIFYING DISABILITIES
STATE OF TEXAS COUNTY OF	
Before me, the undersigned authority, personally appearedwho, being by me duly sworn, deposed as follows: "My name is	
to make this affidavit. I have personal knowledge of the facts contained he exemption under Tax Code §11.13(c) or (d) and am not specifically identif owner of the residence homestead identified in this application. I am a legal	I am over 18 years of age and I am otherwise fully competent erein and all of same are true and correct. I meet the qualifications for a residence homestead fied on a deed or other appropriate instrument recorded in the applicable real property records as an all owner of the property with a community property interest.
Further, Affiant sayeth not."	
Signature of Affiant	SUBSCRIBED AND SWORN TO before me this, the,
	Notary Public in and for the State of Texas My Commission expires:
AFFIDAVIT FOR PERSONS WHO A	ARE AGE 65 OR OLDER OR HAVE QUALIFYING DISABILITIES
STATE OF TEXAS COUNTY OF	
Before me, the undersigned authority, personally appeared who, being by me duly sworn, deposed as follows:	
"My name isto make this affidavit. I have personal knowledge of the facts contained he	I am over 18 years of age and I am otherwise fully competent erein and all of same are true and correct. I meet the qualifications for a residence homestead fied on a deed or other appropriate instrument recorded in the applicable real property records as an all owner and own percent of the property.
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:
MAN	UFACTURED HOME AFFIDAVIT
STATE OF TEXAS	
COUNTY OF	,
to make this affidavit. I have personal knowledge of the facts contained he	I am over 18 years of age and I am otherwise fully competent erein and all of same are true and correct. Inspired provide mediation. The seller of the manufactured home did not provide me with a purchase contract in a purchase contract.
Signature of Affiant	
	SUBSCRIBED AND SWORN TO before me this, the,
	Notary Public in and for the State of Texas My Commission expires:

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APPLICATION FOR RESIDENTIAL HOMESTEAD EXEMPTION INSTRUCTIONS

GENERAL INSTRUCTIONS: This application is for use in claiming general homestead exemptions pursuant to Tax Code Sections 11.13, 11.131, 11.132 Versions 1 and 2, and 11.432. The exemptions apply to your residence homestead that you own and occupy as your principal residence.

WHERE TO FILE: File the completed application and all required documents with the appraisal district for the county in which the property is located.

APPLICATION DEADLINES: You must 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, you must 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 and 11.132, 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 do to so, or if you want the exemption to apply to property not listed in this application. You must notify the chief appraiser in writing if and when your right to this 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.

Include with applications that include a request for an AGE 65 OR OLDER OR DISABLED 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 or other compelling evidence establishing the applicant's ownership of an interest in the homestead.

Include with an application for a request for a 100% DISABLED VETERANS exemption:

In addition to the information identified above, an applicant for a 100% disabled veterans 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 or its successor 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.

Include with applications for MANUFACTURED HOMES:

For a manufactured home to qualify for a residence homestead, applicant must **ALSO** include:

- 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; or
- 3) a sworn affidavit 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.

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