

Application Instructions for Homestead Exemption Application (DR-501)

Your application, once completed **and signed**, may be mailed or filed in person at [one of our offices](#) by **March 1**.

Mailing Address:

Rob Turner
Hillsborough County Property Appraiser
Attention: Exemption Department
601 E Kennedy Blvd 16th floor
Tampa FL 33602-4932

Completing the form in its entirety will expedite the process of your application.

Complete the form as follows:

1. Folio/PIN: Write either your 10-digit folio number or 22 digit PIN number [\[property record search\]](#).
2. Tax Year: The year for which you are seeking Homestead Exemption. If you owned the property and resided in the home before January 1, and you are completing the form before March 1, use the current calendar year; otherwise use the upcoming calendar year.
3. Name and Address: Write the owner(s) name, property address and mailing address.
4. Exemptions: Please check the appropriate box to indicate the type of exemption for which you are making the application. Refer to the [Eligibility Criteria on our website](#).
5. Legal Description: Write the legal description (subdivision name, lot and block or metes and bounds) of your property (obtained from a copy of your deed, tax bill or copied from website). [\[property record search\]](#).
6. Social Security Number: Write Social Security Number for each owner who is residing and the respective spouse, if married.
7. Marital Status: Mark the appropriate box.
8. Did you have homestead exemption last year? Indicate where you resided before you moved in this home.
9. Proof of residence for all owners living in the property. Each owner making application for Homestead Exemption must complete this section. Write the owner's name above each column and complete the area below for that person.
 - Address of owner not residing on property – for any owner not residing on subject property; give us the address where they live.
 - Date of Occupancy – the date you moved on this property
 - Florida Voter Registration Number – If not registered, indicate if US Citizen or Resident Alien.
 - Florida Driver License Number.

10. All owners making application must sign the form.
11. Date: Enter date of application.
12. Phone number: Write in your daytime telephone number, including area code.

Required Documentation

Provide a copy of your Florida Driver License, OR
ONE of the following, if you do not drive

- a. Florida Identification Card *
- b. Florida Voter Registration Card

* You can not have a valid driver license from another state and a Florida ID card.

If you are NOT a United States Citizen, attach a **copy** of your Permanent Resident Card (front and back)

A Social Security number is required for all owners making application and their spouses, even if the spouse does not own and/or reside on the property, per Florida Statute.

If title to the property on which you are applying is held in a trust, a copy of the trust or Memorandum of Trust must be submitted.

If you are applying for homestead exemption and you live in a mobile home, a Real Property application must also be submitted. Please contact our office.

If you still have questions regarding the Homestead Exemption application, please contact the Exemption Department at 272-6100 or email custserv@hcpafl.org.



Original Application for Ad Valorem Tax Exemption

DR 501
R. 12/08
fillable

County, Florida

Tax Year

New Change Additional Property Identification Number

1

Applicant/Co-applicant Name and Address: 3

Legal Description: 5

Applicant Social Security SSN 6

Co-Applicant Social Security SSN

NOTE: Disclosure of your social security number is mandatory. It is required by section 196.011 (1), Florida Statutes. The social security number will be used to verify taxpayer identity information and homestead exemption information submitted to property appraisers.

Marital status: Single Married Divorced 7
 Widow Widower

Did you file tax exemptions last year? Yes No 8
Where?

If no, your last year's address:

Permanent Florida residency required as of January 1

Homestead exemption up to \$50,000¹

\$500 Widow's exemption

\$500 Widower's exemption

\$500 Disability exemption

\$500 Blind persons exemption

\$5000 Disabled Veteran

Total and permanent disability exemption-Quadriplegics²

Service connected total and permanent disability exemption²

Exemption for disabled veterans confined to wheelchairs²

Total and permanent disability exemption²

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¹ To apply for an additional homestead exemption enacted by local ordinance for persons age 65 and older you must file form DR-501SC. You must either receive, or apply for, the regular homestead to get this additional homestead exemption. If you have already received regular homestead exemption, you do not need to file another form DR-501.

² Documentation required

Ownership information

Percent of ownership: Type of deed:

Recorded: Book: Page:

Date recorded: Date of deed:

Proof of residence for all owners	Owner	Spouse	Other owner
Address of each owner not residing on property			
Date you last became a permanent resident of Florida	Date	Date	Date
Date of occupancy	Date	Date	Date
Florida driver license number	Date	Date	Date
Florida vehicle tag number			
Florida voter registration number (if U.S. citizen)	Date	Date	Date
Immigration number (alien card — if not a U.S. citizen)	Date	Date	Date
Declaration of domicile	Res Date	Res Date	Res Date
Date of birth	Date	Date	Date
Current employer			
Address listed on your last IRS return			

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I authorize this agency to obtain information to determine my eligibility for the exemptions applied for. I qualify for these exemptions under Florida Statutes. I am a permanent resident of the State of Florida and I own and occupy the property above. I understand that under section 196.131(2), Florida Statutes, any person who knowingly gives false information to claim homestead exemption is guilty of a misdemeanor of the first degree, punishable by imprisonment up to 1 year, a fine up to \$5,000 or both. Under penalties of perjury, I declare that I have read the foregoing application and the facts in it are true.

NOTE: If all information is not received by March 1st, your application will be processed for whatever exemptions you qualify for on that date.

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Signature of applicant
11
Date

Signature of co-applicant
12
Phone Number

Signature of deputy
Entered by



Original Application for Ad Valorem Tax Exemption

DR 501
R. 12/08
fillable

_____ County, Florida

Tax Year _____

New Change Additional Property Identification Number _____

Applicant/Co-applicant Name and Address:	
Legal Description:	
Applicant Social Security	SSN _____
Co-Applicant Social Security	SSN _____
<p>NOTE: Disclosure of your social security number is mandatory. It is required by section 196.011 (1), Florida Statutes. The social security number will be used to verify taxpayer identity information and homestead exemption information submitted to property appraisers.</p>	
<p>Marital status: <input type="radio"/> Single <input type="radio"/> Married <input type="radio"/> Divorced <input type="radio"/> Widow <input type="radio"/> Widower</p>	
<p>Did you file tax exemptions last year? <input type="checkbox"/> Yes <input type="checkbox"/> No Where?</p>	
<p>If no, your last year's address:</p>	

Permanent Florida residency required as of January 1	
<input type="checkbox"/>	Homestead exemption up to \$50,000 ¹
<input type="checkbox"/>	\$500 Widow's exemption
<input type="checkbox"/>	\$500 Widower's exemption
<input type="checkbox"/>	\$500 Disability exemption
<input type="checkbox"/>	\$500 Blind persons exemption
<input type="checkbox"/>	\$5000 Disabled Veteran
<input type="checkbox"/>	Total and permanent disability exemption-Quadriplegics ²
<input type="checkbox"/>	Service connected total and permanent disability exemption ²
<input type="checkbox"/>	Exemption for disabled veterans confined to wheelchairs ²
<input type="checkbox"/>	Total and permanent disability exemption ²
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<p>² Documentation required</p>	
Ownership information	
Percent of ownership:	Type of deed:
Recorded: Book:	Page:
Date recorded: _____	Date of deed: _____

Proof of residence for all owners	Owner	Spouse	Other owner
Address of each owner not residing on property			
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Date of occupancy			
Florida driver license number	Date _____	Date _____	Date _____
Florida vehicle tag number			
Florida voter registration number (if U.S. citizen)	Date _____	Date _____	Date _____
Immigration number (alien card — if not a U.S. citizen)	Date _____	Date _____	Date _____
Declaration of domicile	Res Date _____	Res Date _____	Res Date _____
Date of birth	Date _____	Date _____	Date _____
Current employer			
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_____ Signature of applicant

_____ Signature of co-applicant

_____ Signature of deputy

_____ Date

_____ Phone Number

_____ Entered by