Original Application for Assessment Reduction for
Living Quarters of Parents or Grandparents
Section 193.703, Florida Statutes

**APPLICANT/CO-APPLICANT**

<table>
<thead>
<tr>
<th>Name and Address</th>
<th>Legal Description</th>
</tr>
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<table>
<thead>
<tr>
<th>Description of construction/reconstruction qualifying as providing living quarters</th>
<th>Completion date of the construction/reconstruction for which the assessment reduction is applied</th>
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<tr>
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<td>____ / ____ / _____</td>
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Did you get a building permit?  Yes  No

**PARENT/GRANDPARENT(s) for whom the living quarters were constructed or reconstructed**

<table>
<thead>
<tr>
<th>Name 1</th>
<th>Name 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>DOB ____ / ____ / _____</td>
<td>DOB ____ / ____ / _____</td>
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</tbody>
</table>

- Single
- Widow/Widower
- Married
- Divorced

Parent / grandparent last years address:

Did parent/grandparent file tax exemptions last year?  Yes  No

**PROOF OF RESIDENCE FOR ALL PARENTS /GRANDPARENTS**

<table>
<thead>
<tr>
<th>Last became a permanent Fla resident ____ / ____ / ____</th>
<th>Current employer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupied applicant’s homestead on ____ / ____ / ____</td>
<td>Declaration of Domicile Residency date ____ / ____ / ____</td>
</tr>
<tr>
<td>Fla driver license number</td>
<td>Address listed on parent’s/grandparent’s last IRS return</td>
</tr>
<tr>
<td>Fla vehicle tag number</td>
<td></td>
</tr>
<tr>
<td>Fla voter registration number (if U.S. citizen)</td>
<td></td>
</tr>
<tr>
<td>Immigration number (Alien Card if not a U.S. citizen)</td>
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</tr>
</tbody>
</table>

Address of parent /grandparent not residing on property

Signature of applicant

Signature of co-applicant

Signature of qualifying parents or grandparents

Signature of deputy
By signing this application:

I hereby authorize the property appraiser to obtain information necessary to determine my eligibility for the assessment reduction applied for.
I hereby certify that the above named person is a qualified parent or grandparent and resided primarily on the property on January 1 of the year this assessment reduction is applied for, and that to my knowledge does not claim homestead exemption elsewhere in Florida nor residency based exemption or tax benefit in another state.
I hereby make application for the assessment reduction indicated and affirm that I do qualify for same under Florida Statutes. I am a permanent resident of the State of Florida and I own and occupy the property described above. I understand that section 196.131(2), Florida Statutes, provides that any person who knowingly and willfully gives false information for the purpose of claiming homestead exemption is guilty of a misdemeanor of the first degree, punishable by a term of imprisonment not exceeding 1 year or a fine not exceeding $5,000 or both.

Further, under penalties of perjury, I declare that I have read the foregoing application and the facts in it are true.

Proof of age shall be prima facie established for persons 62 and older by submission of one of the following:

- Certified copy of birth certificate
- Driver license or Florida identification card
- Passport
- Life insurance policy in effect for more than two years
- Marriage certificate
- Permanent Resident Card (formerly known as Alien Registration Card)
- Certified school records; or certified census record

In the absence of one of these forms of identification, the property appraiser may rely on such other information that establishes the age of the parent / grandparent.
A physical inspection of the interior and exterior of the property will be required to complete the application for the “Granny Flats” benefit. We ask that the following information be made available to our office as a part of the application.

DESCRIPTION OF ALL WORK COMPLETED FOR THE PARENT OR GRANDPARENT:

Please describe the work completed for the “Granny Flats” living area including interior and exterior renovation and any new construction. If you have made additions to the building or added new buildings please describe the changes in detail.

________________________________________
________________________________________
________________________________________
________________________________________

DOCUMENTATION SUPPORTING THE WORK COMPLETED:

Please provide supporting documentation for the changes noted above. It is to your benefit to provide as much documentation as possible. You may provide the following:

☐ When did the work begin? Date:______________________________

☐ Permits for construction or reconstruction

☐ Plans and Specifications

☐ Contractor’s cost specifications, Paid invoices

☐ How much did the work cost? Cost:______________________________

☐ When was the work completed? Date:______________________________

☐ Please provide a certificate of completion for all work related to this exemption.