

REQUEST TO REMOVE HOMESTEAD EXEMPTION

Return to: Lake County Property Appraiser
Attn: Exemptions Dept.
320 W. Main St. Suite A
Tavares, FL 32778-3831

Instructions:

Use this form to request the removal of an exemption(s) from your property.

I, _____, request the removal of following exemption(s)
(Please Print the Owner Name(s))
from my property located at _____
(Please List the Street Address of the Property)

Please Check All That Apply.

- | | | |
|--|---|---|
| <input type="checkbox"/> Homestead | <input type="checkbox"/> Limited Income Senior Additional Homestead | <input type="checkbox"/> Widow/Widower's |
| <input type="checkbox"/> \$500 Blind | <input type="checkbox"/> Veterans \$5,000 | <input type="checkbox"/> \$500 Disability |
| <input type="checkbox"/> Combat Related Disability | <input type="checkbox"/> Total Civilian Disability | <input type="checkbox"/> Total Veteran's Disability |

I attest that I no longer qualify for the exemption(s) checked above for the following reason:

- I Moved on _____ (Date)
- The Property is Rented _____ (Date the Property Became a Rental)
- Other _____ (Date)

Please change the mailing address to:

Address _____
City, State, Zip Code _____
Province, Country, Postal Code _____

I/We understand the removal of the above exemption(s) will result in an increase of ad valorem taxes on the above listed property. I have availed myself of the opportunity to ask any questions, seek clarification, or obtain additional information prior to this action being requested. Additionally, I understand that in order to receive the exemption(s) in the future, a new application must be submitted for approval. -

Owner Signature Date Phone Number

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