

APPLICATIONS FOR \$25,000.00 HOMESTEAD EXEMPTION FOR CITIZENS 65 YEARS OR OLDER

Applicant: _____ Applicant: _____

Applicant DOB: _____ Applicant DOB: _____

Address: _____ City/State/Zip: _____

To the City of St. Marys, Georgia:

Tax map and Parcel for homestead: _____

Do you occupy and reside in home full-time? Circle one: Yes No

In accordance with the provision of the State Constitution authorizing increased Homestead Exemption of \$25,000.00 for persons 65 years of age or older, from City of St. Marys Ad Valorem taxes, I hereby make application for the exemption of \$25,000.00 and in support thereof submit the following information:

INCOME FOR YEAR ENDING DECEMBER 31, _____

	Applicant 1	Applicant 2
Retirement Income	\$ _____	\$ _____
Social Security Income	\$ _____	\$ _____
Total Income from Retirement/Soc. Sec.	\$ _____	\$ _____
Deduct Maximum allowable under Soc. Sec. not to exceed line above	\$ _____	\$ _____
Adjusted Income	\$ _____	\$ _____
Other Income from interest, rent, salaries, etc.	\$ _____	\$ _____
Net Income for \$25,000.00 Exemption	\$ _____	\$ _____

Affidavit of Claimant

I, the undersigned claimant, do solemnly swear that the above statements made in support of this application are true and correct, that net income, along with my applicant 2 (if applicable) does not exceed \$25,000, that I am the bonafide owner of the property for which this tax exemption is claimed, that I actually occupied same as my residence on January 1 of the year for which the tax exemption is claimed, that on January 1 of the year for which this tax exemption is claimed, I was 65 years of age or older, and that no transaction have been in collusion with another for the purpose of obtaining this tax exemption contrary to law.

Date: _____ Applicant 1: _____

Date: _____ Applicant 2: _____

Signed, Sealed, and delivered in the presence of:

Witness: _____ Notary Public: _____

My Commission Expires: _____