

Instructions for Completing Your Application

SELECT ALL EXEMPTIONS

Select all exemption(s) for which you are applying. *NOTE* You only need to apply once as long as you own and occupy the property unless you become eligible for additional exemptions **as of January 1** of the year for which you are applying (disability, age 62 or age 65 exemptions).

Proof of Residence for Henry County applicant(s) is required to determine the owner's eligibility for exemptions (i.e. **Vehicle registration, Driver's License, utility bills, etc.**).

RESIDENCE INFORMATION

- 1. Property address** – property address where applicant(s) is applying for exemption. **Attach copy of your Warranty Deed.*
- 2. Property ID/Parcel #** – property id/parcel # where applicant(s) is applying for exemption
- 3. Date applicant(s) began to occupy property** – date moved to this property as primary residence
- 4. Primary/legal residence** – do applicant(s) live at this property
- 5. Mailing Address** – mailing address if different than property address
- 6. Number of houses on property** – total number of houses on this property
- 7. Previous address** – address where applicant(s) lived prior to moving to this property/home (enter SAME if adding an exemption to an existing Homestead)
- 8. Previous primary residence** – Please indicate if previous residence it still owned or has been sold. If the applicant was a tenant, please indicate rented. If none of these apply, indicate Other. Include a separate piece of paper if needed.
- 9. Date moved** – date moved from their previous address

ADDITIONAL PROPERTIES

- 10. Does applicant/spouse claim residency or exemptions on any other property in this or any other county or state?** – list address(es), include a separate piece of paper if needed
- 11. Address(es) of additional property owned by you or your spouse in or out of Georgia** – list address(es), include a separate piece of paper if needed
- 12. Exemption removal letter** – If applicant(s) owns another residence in another County/State, letter from the Tax office must be submitted stating there is NO exemption on said residence(s). Not required if previous address is a Henry address).

APPLICANT INFORMATION

- 13. Applicant Name** – as shown on the recorded deed
- 14. Date of Birth** – birth date(s)
- 15. Phone Number** – daytime phone number(s)
- 16. Email** – email address(es)
- 17. County and state of voter registration** – where applicant is currently registered to vote. *Must be registered in Henry County.
- 18. Attach copy of vehicle registration(s)** – *attach a copy of the current registration(s) reflecting the property address as proof of residency
- 19. Attach copy of Henry County Driver License or ID number** – list driver license number/ID number (*attach a photocopy showing the Henry County address)
- 20. Marital Status** – choose appropriate status
- 21. Spouses Name (if married)** - indicate spouses name even if they are not a listed owner on this property (* attach a photocopy showing the Henry County address
- 22. Active military and legal state of residence** – if yes, list legal state of residence.

Instructions for Filing Your Application

*Exemptions can be applied on only 1 (one) homesteaded property, which means the applicant(s) must own, occupy, and claim the property as their legal residence on **January 1** of the year for which application is made. A married couple is allowed Homestead exemption on only 1 (one) residence.*

Complete application with all required documentation and apply in person or mail to (faxed or emailed copy not accepted):

HENRY COUNTY TAX COMMISSIONER
140 HENRY PARKWAY 164 BURKE STREET
MCDONOUGH, GA 30253 STOCKBRIDGE, GA 30281
770-288-8180

Applications must be received, or U.S. postmarked by April 1 for processing in that tax year. Metered or kiosk postmark is not accepted as proof of timely mailing. If received after filing deadline, application will be processed for the following year.

When filing by mail or in person, provide a copy of the following items along with the application as applicable (other documents may be requested):

- ✓ **Georgia Vehicle Registration** - *Vehicles are required to be registered at primary residence per O.C.G.A.48-5-444. Provide registration for all vehicles owned by you and/or spouse.*
- ✓ **Henry County Driver License or Henry County ID**
- ✓ **Final Divorce Decree** - *Required if indicated divorced.*
- ✓ **Spouse's Death Certificate** - *Required if applicant(s) has joint ownership.*
- ✓ **Homestead Exemption Verification letter from Tax Official** – *Required if applicant(s) owns any other residence in another county/state. This is to verify that no other homestead exemption is being claimed.*
- ✓ **Completed Trust Affidavit** – *Required if property is held in a trust.*

Additional documentation is needed for the following:

Service Connected Disabled Veteran Exemption

- ✓ **Letter from Veteran's Administration** indicating the effective date of the veteran's disability rated at 100% or paid at 100% due to unemployability, service connected, permanent and totally, honorable discharge.

Service Connected Surviving Spouse of an Armed Conflict

- ✓ **Letter from Secretary of Defense** evidencing the unremarried surviving spouse receiving spousal benefits as a result of the death of their spouse.

Henry County Standard Disability Homestead Applications

- ✓ **Proof of disability letter (certified) from two Georgia physicians** licensed to practice medicine under the laws of Georgia certifying that in the opinion of such physicians such person is mentally or physically incapacitated to the extent that such person is unable to be gainfully employed and that such incapacity is likely to be permanent **OR** one letter from a physician licensed to practice medicine under the law of Georgia certifying that in the opinion of such physician such person is mentally or physically incapacitated to the extent that such person is unable to be gainfully employed and that such incapacity is likely to be permanent **and** a copy of the Social Security award letter.

Surviving Spouse of a Firefighter/Peace Officer Killed in the Line of Duty

- ✓ **A copy of a death certificate and documentation** from the municipality evidencing the Firefighter or Peace Officer was killed in the line of duty.



APPLICATION FOR HENRY COUNTY HOMESTEAD EXEMPTIONS

Instructions for completing this application appear on the next page (COMPLETE ALL FIELDS in blue or black ink).

If this application is denied an appeal may be filed in accordance with O.C.G.A. §48-5-311.

Applications must be received, or U.S. postmarked by April 1 for processing in that tax year.

SELECT ALL EXEMPTION(S) FOR WHICH YOU ARE APPLYING as of January 1		
<input type="checkbox"/> Henry County Basic Homestead Exemption (L1) <input type="checkbox"/> Henry County Age Exemption (either applicant) <input type="checkbox"/> Age 62 (L2) <input type="checkbox"/> Age 65 (L3) <input type="checkbox"/> Age 68 (L6) <input type="checkbox"/> Age 70 (L9) <input type="checkbox"/> Totally Disabled Homestead Exemption under 65 (L12) <input type="checkbox"/> Service Connected Disabled Veteran* OR <input type="checkbox"/> Surviving Spouse Service Connected Disabled Veteran* <input type="checkbox"/> Under 65 (L16)* <input type="checkbox"/> Age 65 (L17)* <input type="checkbox"/> Age 68 (L18)* <input type="checkbox"/> Age 70 (L19)* <input type="checkbox"/> Surviving Spouse of an Armed Conflict (SS)* <input type="checkbox"/> Surviving Spouse of a Peace Officer or Firefighter Killed in the Line of Duty (SG) <input type="checkbox"/> Firefighter <input type="checkbox"/> Peace Officer	Tax Year: _____ <i>*Qualified disabled Veterans or their unremarried surviving spouse or minor children pursuant to O.C.G.A. §48-5-48 or by qualified surviving spouses of service members killed in action per O.C.G.A. §48-5-52.1</i>	
RESIDENCE INFORMATION		
1. Property address:(attach copy of Warranty Deed)	2. Property ID/Parcel #:	3. Date applicant(s) began to occupy property:
4. Is property your primary residence? <input type="checkbox"/> Yes <input type="checkbox"/> No	5. Mailing address if different than property address:	6. How many houses on property?
7. Previous primary address:	8. What was the status of previous residence (select one): <input type="checkbox"/> Sold <input type="checkbox"/> Still own <input type="checkbox"/> Rented <input type="checkbox"/> Other/Explain	9. Date moved from previous residence:
ADDITIONAL PROPERTIES		
10. Does the applicant/spouse claim residency or exemption on any other property, in this or any another county/state? <input type="checkbox"/> Yes <input type="checkbox"/> No	11. Address(es) of other properties owned by the applicant/spouse:	12. Letter from a tax office is required if the applicant /spouse owns property not located in Henry County (attach letter).
APPLICANT INFORMATION		
	APPLICANT 1	APPLICANT 2
13. Name		
14. Date of birth		
15. Phone number		
16. Email address		
17. County and state of voter registration – <i>Must be registered in Henry County</i>		
18. Attach copy of vehicle registration – <i>Must be registered in Henry County</i>	Attach copies of all vehicle registrations	Attach copies of all vehicle registrations
19. Attach copy of Henry County Driver’s License or ID	List number for each applicant:	List number for each applicant:
20. Marital status (married, divorced, never married, widowed)		
21. Spouse’s name (if married)		
22. Active Military? <i>If yes, list your legal state of residence and attach a copy of your Leave and Earning Statement.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No Residence State: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No Residence State: _____
<p>I, the undersigned, do solemnly swear that the above statements are true and correct and I have submitted all required documents. I am a qualified applicant according to O.C.G.A §48-5-40 and the bona fide owner of the above described property. I occupied said property as of January 1 of the year for which the exemption is claimed. I understand that making false or fraudulent statements is a misdemeanor and subject to penalties and fines per O.C.G.A. §48-5-51.</p>		
_____ Applicant’s Signature	_____ Date	_____ Applicant’s Signature
_____ Date		