

**OTC
994**

**APPLICATION FOR
PROPERTY VALUATION LIMITATION AND
ADDITIONAL HOMESTEAD EXEMPTION**

**Instructions on Reverse Side
Please Read Carefully**

Applicants
Social Security
Number

____ - ____ - _____

Co-applicants
Social Security
Number

____ - ____ - _____

**CURRENT YEAR
Revision 10-2004**

First Name and Initial (if joint application, give first names and initials of both) _____ Last Name _____

Present Home Address (number and street, apartment/condo number, or rural route) _____

City and State _____ Zip Code _____ Phone Number (____) _____

- A. Was applicant domiciled on the homestead property January 1st of the current year? Yes No
- B. Was the applicant age 65 or over as of January 1st of the current year? Yes No
- C. Was the applicant age 65 or over as of March 15 of current year? Yes No

PART I. Enter Total Gross Income / Assistance received by ALL members or your household in the previous calendar year.

		(Round to nearest whole dollar)	
		Gross Household Annual Income	
1.	Enter total wages, salaries, fees, commissions, bonuses, tips, dividends, royalties, income from partnerships, estates and trusts, and gains from the sale or exchange of property (taxable and nontaxable) 1.		00
2.	Enter gross rental, business and farm income 2.		00
3.	Enter total interest income received 3.		00
4.	Other (Specify) _____ 4.		00
5.	All other household income (Include all other income received from each of the sources listed below:		
	a. Social Security Payments (Total including Medicare) 5.a.		00
	b. Veteran's Disability Payments b.		00
	c. Railroad Retirement Benefits c.		00
	d. Other Pensions and Annuities d.		00
	e. Workmen's Compensation / Loss of Time Insurance e.		00
	f. Support Money f.		00
	g. Alimony g.		00
	h. Public Assistance (Including Housing Assistance) h.		00
	i. Gross Income from out-of-state sources i.		00
	j. Unemployment j.		00
	k. Earned Income Credit received in calendar year k.		00
	l. Total Dependents Income l.		00
	m. Wages Paid in Cash m.		00
	n. Other (Specify) _____ n.		00
6.	Total Gross Household Income (Add line 1 thru 5 n) 6.		00

PART II. Address / Legal Description of Homestead Property:

_____ County: _____

I am the owner of the above said property, and the gross household income statement is accurate and has been fully and correctly disclosed (68 O.S. §2945 provides penalties for false oaths). I understand that if the applicant is not age 65 or over as of March 15th, an application for additional homestead exemption must be filed each year.

Applicant (or Agent) _____ Date _____

PART III. Valuation Limitation - (To Be Completed by the County Assessor) Approved Denied

The records of _____ County indicate this property value is \$ _____ as of January 1, _____ Parcel ID Number: _____ Valuation Limitation Authorized by _____ Date _____

PART IV. Additional Homestead - (To Be Completed by the County Assessor) Approved Denied

1.	Enter the amount of gross household income from Part I, line 6 above 1.		00
2.	Additional exemption authorized by: _____ Date _____ Amount 2.		00

INSTRUCTIONS

ELIGIBILITY REQUIREMENTS:

- (1) Head-of-household must be age 65 or over as of January 1st of current year when filing for property valuation limitation, or March 15 when filing for additional homestead.
- (2) Head-of-household must be an owner of and occupy the homestead property on January 1.
- (3) Valuation Limitation: Gross household income (collective income of all persons living in the homestead residence) must not exceed the amount determined by the United States Department of Housing and Urban Development (H.U.D.) as the qualification income for your individual county of residence. These qualification income levels may be different for each county and are subject to change each year. Contact your county assessor for the exact qualification income.
- (4) Maximum income qualification for the Additional Homestead Exemption is \$20,000.00 for all counties.

PART I. GROSS HOUSEHOLD INCOME

Income from all sources of each individual who lives on the homesteaded property is to be included in this section. (See definition for "gross household income" listed below.) The applicant may be required to provide sufficient proof to substantiate the validity of the income statement.

PART II. IDENTIFICATION OF REAL PROPERTY AFFECTED BY APPLICATION

The physical address or legal description should be entered here to properly identify the homestead residence.

The applicant is to sign and date the application.

PART III. VALUATION LIMITATION - (TO BE COMPLETED BY THE COUNTY ASSESSOR)

Valuation Limitation: A limitation in valuation for homestead property for persons 65 years of age or over as of January 1 with gross household income not exceeding the H.U.D. qualifying income for the preceding year.

You must be age 65 or over as of January 1st to qualify. (Reference 68 O.S. §2890.1)

PART IV. ADDITIONAL HOMESTEAD - (TO BE COMPLETED BY COUNTY ASSESSOR)

The application for such additional homestead exemption shall be made each year before March 15th with the county assessor in the county where the property is located. (Unless the applicant is 65 or over)
(Reference: 68 O.S. 2001 Section 2890)

An additional exemption may be granted to the extent of one thousand dollars (\$1,000) of the assessed valuation of each homestead of heads of household whose gross household income from all sources for the preceding calendar year did not exceed twenty thousand dollars (\$20,000) for the preceding year.

No age requirement for additional homestead exemption qualification however; if age 65 or over as of March 15 of the current year, no annual application is required. (68 O.S. §2890)

No annual application is required for persons previously qualified for the valuation limitation. (68 O.S. §2890.1)

DEFINITIONS

"Head-of-household" is defined in 68 O.S. §2890 as "a person who as owner or joint owner maintains a home and furnishes his own support for said home, furnishings, and other material necessities."

"Gross household income" is defined in 68 O.S. §2890 as "the gross amount of income of every type, regardless of the source, received by **all persons** occupying the same household, whether such income was taxable or nontaxable for Federal or State income tax purposes, including pensions, annuities, federal social security, unemployment payments, veteran's disability compensation, public assistance payments, alimony, support money, workmen's compensation, loss of time insurance payments, capital gains and any other type of income received; and excluding gifts.

Part II, III, IV of this form is to be completed by the county assessor.