



**CITY OF DUBLIN**  
**HB 803 & 805 HOMESTEAD EXEMPTION APPLICATION**  
**P.O. BOX 690**  
**DUBLIN, GA 31040**  
**(478) 277-5016**

<b>I AM APPLYING FOR:</b>	<b>Y</b>	<b>N</b>
<b>HB 803</b> SCHOOL TAX HOMESTEAD EXEMPTION FOR PERSONS 62 YEARS OR OLDER		
<b>HB 805</b> SCHOOL TAX HOMESTEAD EXEMPTION FOR ALL HOMEOWNERS		

**Homeowner / Applicant** \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security No. \_\_\_\_\_

Age at time of application \_\_\_\_\_ Parcel ID \_\_\_\_\_

Property Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

<b>Provided Documents</b>	<b>Y</b>	<b>N</b>
Driver's License / Government ID		
Proof of ownership or other qualifying documentation		

**AFFIDAVIT OF APPLICANT**

I am the bona fide owner of the property for which this tax exemption is claimed. I actually occupied same as my residence on January 1 of the year for which this tax exemption is claimed. I don't claim a homestead exemption for any other property. This application has not been made in collusion with another for the purpose of obtaining this tax exemption contrary to law. I, the undersigned applicant, do solemnly swear, under penalty of law, that the statements made herein and personal information provided in support of this application are true and correct.

**APPLICANT**

**AUTHORIZED TAX OFFICIAL**

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
City of Dublin Tax Official

Signed, sealed and delivered in the presence of:

\_\_\_\_\_  
Notary Public  
(SEAL)

**DATE:** \_\_\_\_\_