## Florida Department of Revenue Office of the Executive Director

**Jim Zingale** Executive Director

5050 West Tennessee Street, Tallahassee, FL 32399

floridarevenue.com

October 27, 2023

Ms. Marjorie C. Holladay, Chief Attorney Joint Administrative Procedures Committee Room 680, Pepper Building 111 West Madison Street Tallahassee, Florida 32399-1400

Re: Department of Revenue, Property Tax Oversight Program Proposed Rule 12D-16.002

Dear Ms. Holladay:

Thank you for your letter of October 6, 2023, regarding your review of the Notice of Proposed Rule published for Rule 12D-16.002, F.A.C. (Index to Forms).

The Department is adding section 196.131, F.S., to the law implemented section of Rule 12D-16.002.

We are also including finalized copies of the forms incorporated by reference in the rule.

If you need additional information, please contact me at 850-717-6536.

Sincerely,

Janet Young

Agency Rules Coordinator

ant S. Young

Attachments



## Application for Catastrophic Event Tax Refund

Section 197.319, Florida Statutes

DR-465 R. 11/23 Rule 12D-16.002 F.A.C. Effective 11/23 Page 1 of 2

This completed application, must be filed with the county property appraiser on or before March 1 of the year immediately following the catastrophic event.

	COMPLETED BY	APPLICANT			
Applicant		County			
name		D			
Mailing		Property			
address		address (if different			
		from mailing)			
Phone			l cation number, if available		
FIIOHE		r arcer identific	ation number, if available		
1. Date the	e catastrophic event occurred in your county				
Number of days property was uninhabitable during     the calendar year that the catastrophic event     occurred (must be uninhabitable for at least 30 days):					
3. Describ	e the catastrophic event				
	property been restored to a habitable condition nen was the property habitable?	n? Yes □ No □	]		
Florida law requires property appraisers to determine if you are entitled to a refund of taxes. Supporting documentation is required for purposes of determining the conditions of uninhabitability, such as utility bills, insurance information, contractors' statements, building permit applications, or building inspection certificates of occupancy.  Under penalties of perjury, I declare that I have read this application and that the facts stated in it are true to the best of my knowledge and belief.					
Signature of property owner Date					
Complete and provide to the county property appraiser.					
COMPLETED BY PROPERTY APPRAISER					
year the	ue of residential parcel as of January 1 of the catastrophic event occurred:				
	of days property was uninhabitable (must be table for at least 30 days):				
3. Postcatastrophic event just value:					
4. Percent change in value:					
The property appraiser has determined that the applicant's entitlement to the refund is based on the above factors.					
Signature.	property appraiser or designee	Da	ate		
, ,	Provide a copy to the				
For approved applications, forward to the county tax collector on or before April 1.					

#### Instructions

Section 197.319, Florida Statutes (F.S.), provides a refund of property taxes paid for residential improved property rendered uninhabitable for at least 30 days due to a catastrophic event. To be eligible for refund, the property must be determined "uninhabitable," that is the property could not be used or occupied for the purpose for which it was constructed for a period of at least 30 days due to damage to, destruction of, or a condition that compromises the structural integrity of the residential improvement which was caused by a catastrophic event. The owner of the property must file a sworn application and supporting documentation with the property appraiser's office by **March 1**, of the year immediately following the catastrophic event.

#### **Completed by Applicant:**

- If available, provide the parcel identification number for the damaged or destroyed property.
- Supporting documentation is required. Attach any documentation supporting the claim that the property
  was uninhabitable during the specified period. Supporting documentation includes utility bills, insurance
  information, contractors' statements, building permit applications, or building inspection certificates of
  occupancy.
- Submit the signed, dated, and completed application with the supporting documentation to the property appraiser's office in the county where the property is located.
- If approved, the county tax collector will issue a refund to the applicant.

The property appraiser will notify the property owner of the determination no later than April 1 of the year following the date on which the catastrophic event occurred. If your application for tax refund under section 197.319, F.S., is not determined satisfactorily, the Florida Property Taxpayer's Bill of Rights recognizes your right to an informal conference with the local property appraiser. You may also file a petition with the value adjustment board clerk, pursuant to section 194.011(3), Florida Statutes, on or before the 30<sup>th</sup> day following issuance of notice by the property appraiser. Regardless of a scheduled informal conference with the property appraiser, petitions involving determinations on refund of taxes for catastrophic event may be submitted to the value adjustment board. Complete and file Form DR-486, *Petition to the Value Adjustment Board – Request for Hearing*, with the value adjustment board clerk (Form DR-486 is incorporated by reference in Rule 12D-16.002, F.A.C.).

#### **Completed by Property Appraiser:**

- The property appraiser must review the application and any supporting documentation submitted by the applicant to determine if the applicant is entitled to a refund of taxes.
- If the applicant is eligible for the refund and the application was timely filed, complete, sign, and date the application. Forward a copy of the application and an official written statement of determination to the tax collector and the applicant within 30 days after the determination and no later than April 1, of the year following the date on which the catastrophic event occurred, providing:
  - The just value of the residential improved property as of January 1 of the year the catastrophic event occurred
  - The total number of days the residential improved property was uninhabitable
  - The postcatastrophic event just value
  - The percent change in value applicable to the residential improved property
- If the applicant is ineligible for the refund, provide a copy of this application, and include an official written statement of the property appraiser's determination no later than April 1 to the applicant.



# ORIGINAL APPLICATION FOR HOMESTEAD AND RELATED TAX EXEMPTIONS

DR-501 Rule 12D-16.002, F.A.C. Effective 11/23 Page 1 of 4

Permanent Florida residency required on January 1. Application due to property appraiser by March 1.

County				r		
I am applying for homestead exemption						
Do you claim resider	ncy in anothe	r county or state? App	olicant? [	] Yes [] N	lo Co-applica	ant? 🗌 Yes 🗌 No
		Applicant			Co-applicant	/Spouse
Name						
*Social Security #						
Immigration #						
Date of birth						
% of ownership						
Date of permanent residency						
Marital status	Single	Married Divorced D	Widowed			
Homestead address				Mailing add	dress, if differen	t
Parcel identification	number or le	gal description		Applicant Phone Co-applicant Phone		
Type of deed		Date of deed				
Recorded: Book_	Page _	Date or Ins	strument i	number		
Did any applicant receive or file for exemptions last year?						
Previous address:						
Please provide as m	uch informati	on as possible. Your co	unty prop	erty apprais	ser will make the	final determination.
Proof of Resi	idence	Applicant			Co-applicant/Spouse	
Previous residency outside Florida and date terminated		date		ite		date
FL driver license or ID card number		date		ite		date
Evidence of relinquishi license from other state	•					
Florida vehicle tag nun	nber					
Florida voter registration US citizen)	on number (if		da	ite		date
Declaration of domicile	, enter date		da	ite		date
Current employer						
Address on your last IRS return						
School location of deper	ndent children					
Bank statement and chaccount mailing address						
Proof of payment of uti		☐ Yes ☐ No		☐ Yes ☐ No		
Name and address of any owners not residing on the property						

\*Disclosure of your social security number is mandatory. It is required by section 196.011(1)(b), Florida Statutes. The social security number will be used to verify taxpayer identity and homestead exemption information submitted to property appraisers.

By local	ordinance only:			
	Age 65 and older with limit	ted income (amount dete	rmined by ordinance)	
	Age 65 and older with limit	ted income and permane	nt residency for 25 years or more	
<b>\$5,0</b>	000 widowed	) blind ☐ \$5,000 tota	lly and permanently disabled	
☐ Tota	al and permanent disabilit	y - quadriplegic		
	tain total and permanent o egally blind	disabilities - limited inco	me and hemiplegic, paraplegic, w	heelchair required,
☐ Fire	st responder totally and pe	ermanently disabled in th	ne line of duty or surviving spouse	<b>e</b>
Sur	viving spouse of first resp	onder who died in the li	ne of duty	
☐ Disa	abled veteran discount, 65	5 or older which carries	over to the surviving spouse	
☐ Vet	eran disabled 10% or mor	re		
☐ Disa	abled veteran confined to w	vheelchair, service-conne	ected	
this this tax	exemption qualify for a paper parcel between January	rorated refund of previou 1 and November 1 and p same exemption on and	veteran or veteran's surviving spous year's taxes if in the previous yerovide proof of the disability as outher parcel in the previous year,	ear they acquired of January 1 of that
Par	cel number	County		
proi and	rated refund of previous y November 1 and provide	ear's taxes if in the prev an official letter*. If you	e duty. Applicants for this exemption of the control of the contro	el between January 1
Par	cel number	County	·	
Othe	er, specify:			
nese exe ermaner understa	emptions under Florida Sta nt residence of my legal or and that under section 19	tutes. I own the property natural dependent(s). (So 6.131(2), F.S., any pers	my eligibility for the exemptions and above and it is my permanent residees. 196.031, Florida Statutes.) on who knowingly and willfully give the first degree, punishable by im	dence or the res false information to
	ne up to \$5,000, or both.	•		
have rea	ad, or have had someone	read to me, the content	s of this form.	
	Il information on this form	and any attachments a	re true, correct, and in effect on Ja	anuary 1 of this year.
certify a				
certify a				

Contact your local property appraiser if you have questions about your exemption. *File the signed application for exemption with the county property appraiser.* 

Signature, property appraiser or deputy	Date	Entered by	Date

#### **PENALTIES**

The property appraiser has a duty to put a tax lien on your property if you received a homestead exemption during the past 10 years that you were not entitled to. The property appraiser will notify you that taxes with penalties and interest are due. You will have 30 days to pay before a lien is recorded. If this was not an error by the property appraiser, you will be subject to a penalty of 50 percent of the unpaid taxes and 15 percent interest each year (see s. 196.011(9)(a), F.S.). For special requirements for estates probated or administered outside Florida, see s. 196.161(1), F.S.

The information in this application will be given to the Department of Revenue. Under s. 196.121, F.S., the Department and property appraisers can give this information to any state where the applicant has resided. Social security numbers will remain confidential under s.193.114(5), F.S.

#### **EXEMPTION AND DISCOUNT REQUIREMENTS**

**Homestead** Every person who owns real property in Florida on January 1, makes the property his or her permanent residence or the permanent residence of a legal or natural dependent, and files an application may receive a property tax exemption up to \$50,000. The first \$25,000 applies to all property taxes. The added \$25,000 applies to assessed value over \$50,000 and only to non-school taxes.

Your local property appraiser will determine whether you are eligible. The appraiser may consider information such as the items requested on the bottom of page 1.

**Save our Homes (SOH)** Beginning the year after you receive homestead exemption, the assessment on your home cannot increase by more than the lesser of the change in the Consumer Price Index or 3 percent each year, no matter how much the just value increases. If you have moved from one Florida homestead to another within the last three years, you may be eligible to take some of your SOH savings with you. See your property appraiser for more information.

File the signed application for exemption with the county property appraiser.

Add		ilable for Qualified Home	<u> </u>	
Formulaine	Amount	Qualifications	Forms and Documents*	Statute
Exemptions	Γ	I	T	
	Determined by local ordinance	Local ordinance, limited income	Proof of age DR-501SC, household income	
Local option, age 65 and older	The amount of the assessed value	Local ordinance, just value under \$250,000, permanent residency for 25 years or more.	DR-501SC, household income	196.075
Widowed	\$5,000		Death certificate of spouse	196.202
Blind	\$5,000		Florida physician, DVA*, or SSA**	196.202
Totally and Permanently Disabled	\$5,000	Disabled	Florida physician, DVA*, or SSA**	196.202
	All taxes	Quadriplegic	2 Florida physicians or DVA*	196.101
	All taxes	Hemiplegic, paraplegic, wheelchair required for mobility, or legally blind Limited income	DR-416, DR-416B, or letters from 2 FL physicians (For the legally blind, one can be an optometrist.) Letter from DVA*, and DR-501A, household income	196.101
Veterans and First Responde	ers Exemptions ar	nd Discount	·	
Disabled veteran discount, age 65 and older which carries over to the surviving spouse		Combat-related disability	Proof of age, DR-501DV Proof of disability, DVA*, or US government	196.082
Veteran, disabled 10% or more by misfortune or during wartime service	Up to \$5,000	Veteran or surviving spouse	Proof of disability, DVA*, or US government	196.24
Veteran confined to wheelchair, service-connected, totally disabled	All taxes	Veteran or surviving spouse	Proof of disability, DVA*, or US government	196.091
Service-connected, totally and permanently disabled veteran or surviving spouse	All taxes	Veteran or surviving spouse	Proof of disability, DVA*, or US government	196.081
Surviving spouse of veteran who died while on active duty	All taxes	Surviving spouse	US Government or DVA letter attesting to the veteran's death while on active duty	196.081
First responder totally and permanently disabled in the line of duty or surviving spouse	All Taxes	First responder or surviving spouse	Proof of Disability, employer certificate, physician's certificate and SSA** (or additional physician certificate)	196.102
Surviving spouse of first responder who died in the line of duty	All taxes	Surviving spouse	Letter attesting to the first responder's death in the line of duty	196.081
*DVA is the US [	Department of Veterans	Affairs or its predecessor. **SSA is	the Social Security Administration.	

### References

This form mentions the following documents, which are incorporated by reference in Rule 12D-16.002, F.A.C.

The forms may be available on your county property appraiser's website

or the Department of Revenue's website at floridarevenue.com/property/forms

<u>Form</u>	Form Title
DR-416	Physician's Certification of Total and Permanent Disability
DR-416B	Optometrist's Certification of Total and Permanent Disability
DR-501A	Statement of Gross Income
DR-501DV	Application and Return for Homestead Tax Discount, Veterans Age 65 and Older with a Combat-Related Disability and Surviving Spouse
DR-501SC	Adjusted Gross Household Income, Sworn Statement and Return