



DEPLOYED MILITARY EXEMPTION APPLICATION

DR-501M
R. 09/17
Rule 12D.16.002, F.A.C.
Eff. 09/17

Section 196.173, Florida Statutes

Due to the property appraiser by **March 1**.

Florida Law provides an additional ad valorem exemption on the homestead of servicemembers who were deployed last year outside the continental United States, Alaska, or Hawaii in support of main or subordinate military operations designated by the Florida Legislature.

If more than one owner of the homestead was deployed last year, each deployed servicemember should complete a separate application.

| COMPLETED BY APPLICANT | | | |
|--|--|-------------------------------|------|
| Servicemember's name | | Spouse's name | |
| *Social security # | | *Spouse's social security # | |
| Parcel ID, if known | | County | |
| Phone | | Tax year | 20__ |
| Homestead address | | Mailing address, if different | |
| Designated operation(s) you were deployed to _____ Dates deployed last year: From ___ / ___ / 20__ to ___ / ___ / 20__ for a total of ___ days (outside the continental US, Alaska, and Hawaii to a designated military operation) From ___ / ___ / 20__ to ___ / ___ / 20__ for a total of ___ days <div style="text-align: right;">Total days deployed: _____</div> | | | |
| <input type="checkbox"/> I have attached proof of qualifying deployment. (Information must include dates of the qualifying deployment) | | | |
| <input type="checkbox"/> I am applying after the deadline because: (Add documentation, if needed.) (Field will expand online) | | | |

*Disclosure of your social security number is mandatory. It is required by s. 196.011(1)(b), F.S. The social security number will be used to verify taxpayer identity and exemption information submitted to the property appraiser.

Signature Print name Date

Signature is by servicemember spouse designee under Chapter 709, F.S. Personal representative

If this application was filed on time and is denied, the property appraiser will send you a notice of disapproval (Form DR-490) by July 1. You have the right to appeal the decision by filing a request for hearing (Form DR-486) with the Value Adjustment Board in your county.

| FOR USE BY PROPERTY APPRAISER S OFFICE ONLY | |
|---|------|
| <input type="checkbox"/> Approved for _____ days, proof of qualifying deployment and dates of deployment met the requirements. | |
| <input type="checkbox"/> Denied or <input type="checkbox"/> Denied in part Explain: | |
| <input type="checkbox"/> Late application The reason for filing late was <input type="checkbox"/> accepted <input type="checkbox"/> rejected. | |
| Signature, property appraiser or deputy | Date |
| Calculation: _____ Days deployed / <u>365</u> Days in year X 100 = _____ % exempted | |