

Tax Year: _____

*****CURRENT YEAR APPLICATIONS WILL NOT BE ACCEPTED AFTER JULY 1ST *****

City of Lovejoy Property Tax 100% Exemption Application

A completed application must be filed for each tax year. Please type your answers or write legibly. If you have any questions regarding this application, please call (770) 471-2304 x1.

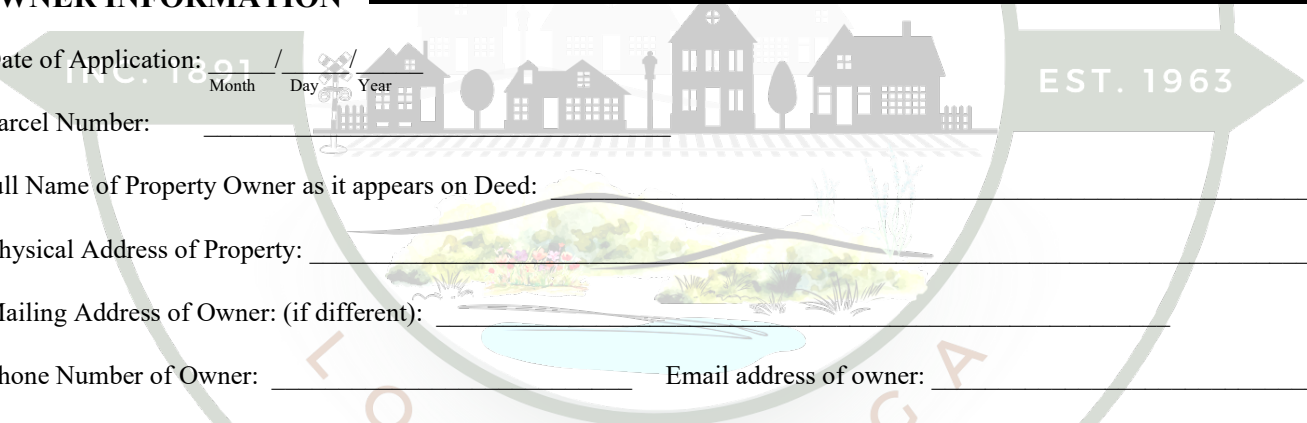
All applications must include a copy of one of the following valid forms of proof of age and residency with this application: A valid Georgia Driver's License OR a Georgia Identification (ID) Card (showing the address of exemption). Disabled Veterans must provide a copy of a letter from the VA showing 100% service connected benefits as of January 1 of the tax year.

NOTE: Individuals using forms indicating a different name must demonstrate a connection to the current name by including a copy of a marriage certificate or other supporting documents.

Property tax exemptions also apply to fees included on tax bills, including sanitation fees.

Check one (or all that apply): ☐ 65 & Older Exemption ☐ 100% Disabled Veteran Exemption

OWNER INFORMATION

- 
1. Date of Application: _____ / _____ / _____
Month Day Year
 2. Parcel Number: _____
 3. Full Name of Property Owner as it appears on Deed: _____
 4. Physical Address of Property: _____
 5. Mailing Address of Owner: (if different): _____
 6. Phone Number of Owner: _____ Email address of owner: _____
 7. Date Property was Acquired by Owner: _____ / _____ / _____
Month Day Year

AFFIRMATION: I, the undersigned, declare under penalties of law that this application and any attachments are true and correct to the best of my knowledge and belief. I am at least 65 years of age and/or a 100% disabled veteran as of January 1st of the current calendar year, and the primary resident AND property owner of the above listed property.

Signature of Owner: _____ Date: _____

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE _____ DAY OF _____, 20____.

NOTARY PUBLIC

MY COMMISSION EXPIRES

OFFICE USE ONLY: [] APPROVED [] DENIED

BY: _____ DATE RECEIVED ON OR BEFORE JULY 1ST: _____

VALID DRIVER'S LICENSE: [] YES [] NO

VA LETTER OR PROOF OF BENEFITS: [] YES [] NO

IF DENIED, REASON FOR DENIAL: _____