SENIOR/DISABILITY HOMESTEAD EXEMPTION APPLICATION

The City of Fairburn offers a Homestead Exemption to residents within the city limits. This exemption reduces your assessed property value by $10,000. Each household may have only one exemption. Rental properties or investment properties are not eligible for Homestead Exemptions.

This application must be submitted or postmarked by postal mail NO LATER THAN APRIL 1st.

To qualify for this Senior exemption, you must meet ALL the following requirements:

- Be 65 or older by January 1st and meet the income requirements of the year in which the exemption would apply.
- Live in the home (primary residence)
- Meet the income requirements
  - no more than $15,800 in Social Security if single
  - no more than $31,600 if married
- Present Federal and State Income Tax Return as proof of income.
- Driver's License
- All Vehicle Registrations
- Social Security Award letter (If you do not file income tax)

Please submit your current Federal & Georgia State Income Tax Return with this application.

To qualify for medically certified as disabled and unable to work exemption, you must meet ALL the following requirements:

- Be 65 or older by January 1st and meet the income requirements of the year in which the exemption would apply.
- Live in the home (primary residence)
- Meet the income requirements
  - no more than $15,800 in Social Security if single
  - no more than $31,600 if married
- Present Federal and State Income Tax Return as proof of income.
- Driver's License
- All Vehicle Registrations
- Social Security Award letter (If you do not file income tax)
- Up to three (3) physicians licensed to practice medicine in the state of Georgia must complete and sign a certificate provided by the Tax Assessors Office of Fulton County.
- The signing physician must certify that one or more individuals listed on the deed are mentally or physically incapacitated to the extent that they are unable to be gainfully employed, and that such incapacity is likely to be permanent.

You qualify for the $10,000 off the assessed value if you meet disability requirements.

For questions or more information, please contact the City of Fairburn Tax Office at (770) 964-2244 ext. 115.
SENIOR/DISABLED HOMESTEAD EXEMPTION APPLICATION

Date: __________________________

Property Owner: ____________________________________________________________

Property Address: ____________________________________________________________

__________________________________________________________________________________________

Telephone Number: (_____) ________-______________

Claimant’s Date of Birth: Month ______ Date ______ Year _______

Claimant’s Social Security Number: _______-______-__________

Spouse’s Name: ______________________________________________________________

Spouse’s Date of Birth: Month ______ Date ______ Year _______

Spouse’s Social Security Number: _______-______-__________

I, the undersigned claimant, do solemnly swear that the above statements made in support of this application are true and correct, that I am the bona fide owner of the property for which this tax exemption is claimed, that I actually occupied same as my primary resident on January 1 of the year for which this tax exemption is claimed, I am 65 year of age or older, my net income together with the income of my spouse meets the Income Limit, and that no transaction has been made in collusion with another for the purpose of obtaining this tax exemption contrary to Law.

__________________________
Homestead Claimant Signature

Notary Public:
Sworn to and subscribed before me this
_______ Day of ____________________ 20____

__________________________
Notary Public Signature