

**LOUISIANA SPECIAL ASSESSMENT LEVEL APPLICATION**

(Property Must Be Homestead Exempt To Qualify)

Tax Year Applied: \_\_\_\_\_

Application Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Owners' SS#: \_\_\_\_\_

Owners' Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Spouse's Name: \_\_\_\_\_

Spouse's SS#: \_\_\_\_\_

Spouse's Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Adjusted Gross Income for the year prior to application: \$\_\_\_\_\_.

**Please send a copy of last year's income tax statement for verification of income.**

Amount of increase in value of property due to construction or reconstruction since last application: \_\_\_\_\_.

**IMPORTANT NOTE:** The special assessment application, if granted, freezes the assessed value of your exempted property.

**In the event the property is sold, the special assessment level shall terminate.**

I have read the above information and certify that the information regarding my personal qualifications is true and correct. I understand that it is a criminal offense to make any false statements for the purpose of procuring a special assessment level.

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

ASSESSOR'S OFFICE USE ONLY:

ASSESSMENT #: \_\_\_\_\_

BOOK/FOLIO/LINE: \_\_\_\_\_

LAND VALUE: \_\_\_\_\_ IMP. VALUE: \_\_\_\_\_ ASSESSED VALUE: \_\_\_\_\_

BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_