James D. Rainey

Lauderdale County Assessor P O Box 687

Meridian, MS 39302-0687

Homestead Exemption Worksheet

Please note this is NOT a Homestead Exemption Application.

This is information you will need to file for Homestead Exemption. Please fill out and present it, along with the other required documents, to the deputy assessor to file your application. **PLEASE PRINT.**

Applicant Last Name First Middle			Social Security Number		Date of Birth	
Spouse Last Name First Middle Email			Social Security Number Phone Number		Date of Birth	
Physical Address						
Mailing Address						
Marital Status (circle one)	Married N	Vidowed	Single	Divorced	Separated	
Residence is a (circle one) (Mobile Home must be reg				•	l itary? Yes No	
What was the Purchase Pr	ice of the prop	erty?		Amount of do	wn payment	
Previous Owner	If related, what relationship					
Do you and your spouse cl	aim Mississipp	oi as your lega	l residence?	Yes No		
Did you file homestead an	ywhere last ye	ear? Yes	No	If so, where?		
Please list below your Mis ALL TAG NUMBERS MUST	••	•		-		
		/				

There are additional exemptions for which you may be eligible. If you or your spouse meet any of the following conditions as of January 1st of this tax year, you must provide proof.

- Age 65 or over (driver's license or birth certificate)
- 100% Disability (Social Security Awards letter or Benefits Planning Query printout from the Social Security Office, or 2 different doctor's letters stating total disability and expected duration of disability)
- 100% DAV (Bring car tag letter provided by the VA that states that you are 100% permanently and totally disabled due to service-connected disabilities)