



**Transfer of Homestead Assessment Difference  
Attachment to Original Application for Ad Valorem Tax Exemption**

DR-501T  
N. 01/30/08  
Eff. 02/08

Section 193.155, Florida Statutes, 12DER-XXXX, Florida Administrative Code

**If you have applied for a new homestead exemption for 2009 and are entitled to transfer a homestead assessment difference from a homestead exemption in 2007 or 2008, file this form with your property appraiser by March 1, 2009. Co-applicants transferring from a different homestead must fill out a separate form.**

**NEW HOMESTEAD APPLICANT-COMplete STEP 1-5**

<b>STEP 1</b>		<b>NEW HOMESTEAD</b>	
Applicant Name		Home Phone (include area code)	Work Phone (include area code)
New Address		Parcel ID Number	
City, State, ZIP		County SEMINOLE	Total number of owner applicants

<b>STEP 2</b>		<b>PREVIOUS HOMESTEAD</b>	
County	Parcel ID Number	Date sold or no longer used as your homestead	
Address		City, State, ZIP	

<b>STEP 3*</b>	Co-applicants who owned and lived at the previous homestead.		<b>STEP 4*</b>	Other owners of the previous homestead not applying for transfer to this new homestead.	
	1.	_____		1.	_____
	2.	_____		2.	_____
	3.	_____		Did any of these owners remain in the previous homestead? Yes <input type="checkbox"/> No <input type="checkbox"/>	

<b>STEP 5*</b>		<b>THE APPLICANT AND ALL CO-APPLICANTS (STEP 3) MUST SIGN BELOW</b>	
I affirm that I qualify for homestead exemption assessment transfer from the above previous homestead. Under penalties of perjury, I declare that I have read the foregoing application and the facts in it are true.			
Signature of Applicant		Date	
Signature of Co-applicant 1		Date	
Signature of Co-applicant 2		Date	

<b>COMPLETED BY PROPERTY APPRAISER OF APPLICANT'S NEW COUNTY</b>	
Signature of Property Appraiser or Deputy <i>David Johnson</i>	Date
If previous homestead was in a different county, add your contact information. Send this form with a copy of the <i>Original Application for Ad Valorem Tax Exemption</i> (Form DR-501) to the Property Appraiser's office in the county of your previous homestead.	
Contact Name <u>SENDY SHAFFER / TAMMY BALES</u>	Mailing Address <u>EXEMPTION DEPARTMENT</u>
Fax _____	<u>1101 E. FIRST STREET</u>
E-mail address <u>portability@scpafl.org</u>	City, State, ZIP <u>SANFORD FL 32771</u>

<b>INSTRUCTIONS TO PROPERTY APPRAISER OF PREVIOUS HOMESTEAD</b>
Based on your count's records, complete and return Form DR-501R, <i>Certificate of Transfer of Homestead Assessment Difference</i> , to the contact above by April 1 <sup>st</sup> or within 2 weeks after receiving Form DR-501T, <i>Transfer of Homestead Assessment Difference</i> , whichever is later.

\*Use additional pages, if needed.