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## Notice

### To Owners of Homesteaded Property in Monroe County Rendered Uninhabitable by a Calamity

The legislature, in the 2006 session, amended the homestead exemption tax provisions §196.031(6), Fla. Stat. to provide for the continuation of the exemption when the home has been rendered uninhabitable by misfortune or calamity.

If your home has been rendered **uninhabitable**, by a calamity, such as hurricane, or fire, etc., you now have to notify this office by March 1<sup>st</sup> of the year following the calamity that you intend to repair or rebuild the home and retain it as your homestead, exclusive of any other homestead. The repair or reconstruction has to be commenced within three (3) years of January 1<sup>st</sup> of the year following the occurrence.

If you have any questions or you would like to request a form to provide notice, please visit our website at [www.mcpafl.org](http://www.mcpafl.org) to download the form or you may call or visit one of the offices of the

Property Appraiser listed below:

#### Key West

County Courthouse  
500 Whitehead St.  
(305) 292-3420  
(305) 292-3431 (Fax)

#### Marathon

Marathon Government Center  
2798 Overseas Hwy, Ste. 310  
(305) 289-2550  
(305) 289-2555 (Fax)

#### Plantation Key

Plantation Government Center  
88700 Overseas Hwy.  
(305) 852-7130  
(305) 852-7131 (Fax)

**FAILURE TO COMPLY WITH THIS PROVISION COULD RESULT IN YOUR  
EXEMPTION BEING DECLARED ABANDONED.**

**APPLICATION TO MAINTAIN HOMESTEAD EXEMPTION  
ON HOMESTEADED PROPERTY MADE UNINHABITABLE  
BY MISFORTUNE OR CALAMITY**

Parcel Identification: \_\_\_\_\_ Property Id: \_\_\_\_\_

I/We, \_\_\_\_\_  
(name of owners)

hereby give Notice pursuant to Section 196.031(6), Florida Statutes that my/our residence located at  
\_\_\_\_\_, Monroe County, Florida was damaged by  
(location of property)

\_\_\_\_\_ on \_\_\_\_\_  
(type of calamity) (date of calamity)

and was rendered **uninhabitable**. I/We intend to maintain this residence as my/our Homestead even though we have to vacate during reconstruction. I/We understand that the reconstruction must be commenced within three (3) years after January 1<sup>st</sup> of the year following the occurrence of the damage or I/we could be deemed to have abandoned my/our Homestead status.

\_\_\_\_\_  
Signature of Owner                      Date                      Telephone #                      E-mail Address

\_\_\_\_\_  
Signature of Co-Owner/Spouse                      Date                      Telephone #                      E-mail Address

Please complete, sign and return this form to the address above.

Note: If you would like to change your mailing address on the tax roll records, please complete and sign page 2 of this form. The address change form is also available on our website.

|  |                       |
|--|-----------------------|
| <b>For Office Use Only:</b>  |                       |
| Inspected By: _____  | Date Inspected: _____ |
| Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No | Comments: _____       |
| _____  |                       |
| Processed by: _____  | Date: _____           |

## Request for Mailing Address Change

If you would like to change your mailing address for tax roll purposes, please complete and sign this form and return to the address above. **An incorrect mailing address may result in the loss of exemptions.**

**IMPORTANT NOTICE – ADDRESS CHANGE WILL NOT BE CONSIDERED IF FORM IS NOT SIGNED AND DATED.**

**YOU MUST BE THE OWNER OF RECORD OR HAVE POWER OF ATTORNEY FOR THE OWNER OF RECORD TO REQUEST A CHANGE OF MAILING ADDRESS. COPY OF THE POWER OF ATTORNEY MUST BE ATTACHED OR THE ADDRESS WILL NOT BE CHANGED.**

Parcel Identification: \_\_\_\_\_ Property ID #: \_\_\_\_\_  
 Real Estate       Tangible Personal Property

Parcel Identification: \_\_\_\_\_ Property ID #: \_\_\_\_\_  
 Real Estate       Tangible Personal Property

Parcel Identification: \_\_\_\_\_ Property ID #: \_\_\_\_\_  
 Real Estate       Tangible Personal Property

Parcel Identification: \_\_\_\_\_ Property ID #: \_\_\_\_\_  
 Real Estate       Tangible Personal Property

Parcel Identification: \_\_\_\_\_ Property ID #: \_\_\_\_\_  
 Real Estate       Tangible Personal Property

Owner(s) of Record: \_\_\_\_\_  
Please Print

New Mailing Address: \_\_\_\_\_

\_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Current owner of record must sign)

**FOR OFFICE USE ONLY:**      CC Tax Collector:       HX:       Entered By: \_\_\_\_\_      Date: \_\_\_\_\_

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