

# Application for Transitional Housing Property Tax Exemption

Travis Central Appraisal District

Appraisal District's Name

(512) 834-9138

Phone (area code and number)

MAILING: P O BOX 149012 AUSTIN, TX 78714-9012      OFFICE: 8314 CROSS PARK DR. AUSTIN, TX 78754

Address, City, State, ZIP Code

**GENERAL INSTRUCTIONS:** This application is for use in claiming a property tax exemption for property owned by the United States or an U.S. agency and used to provide transitional housing for the indigent under a program operated or directed by the United States Department of Housing and Urban Development pursuant to Tax Code Section 11.111. The exemption may apply to a nonprofit organization leasing qualifying property for the purposes of providing transitional housing. This application applies to property owned on Jan. 1 of this year.

**FILING INSTRUCTIONS:** You must furnish all information and documentation required by this application so that the chief appraiser is able to determine whether the statutory qualifications for the exemption have been met. This document and all supporting documentation must be filed with the appraisal district office in each county in which the property is located. Do not file this document with the Texas Comptroller of Public Accounts. A directory with contact information for appraisal district offices may be found on the Comptroller's website.

**APPLICATION DEADLINES:** You must file the completed application with all required documentation beginning Jan. 1 and no later than April 30 of the year for which you are requesting an exemption.

**ANNUAL APPLICATION REQUIRED:** You must apply for this exemption each year you claim entitlement to the exemption.

## OTHER IMPORTANT INFORMATION

Pursuant to Tax Code Section 11.45, after considering this application and all relevant information, the chief appraiser may request additional information from you. You must provide the additional information within 30 days of the request or the application is denied. For good cause shown, the chief appraiser may extend the deadline for furnishing the additional information by written order for a single period not to exceed 15 days.

State the tax year for which you are applying for the exemption.

\_\_\_\_\_  
Tax Year

## STEP 1: Ownership Information

\_\_\_\_\_  
Name of Property Owner

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City, State, ZIP Code

\_\_\_\_\_  
Phone (area code and number)

Property Owner is a(n) (check one):

Individual     Partnership     Corporation     Other (specify): \_\_\_\_\_

## STEP 2: Applicant Information

\_\_\_\_\_  
Name of Person Preparing this Application

\_\_\_\_\_  
Title

\_\_\_\_\_  
Driver's License, Personal I.D. Certificate  
or Social Security Number\*

If this application is for property owned by a charitable organization with a federal tax identification number, that number may be provided in lieu of a driver's license number, personal identification certificate number or social security number: .....

\* Pursuant to Tax Code Section 11.48(a), a driver's license, personal I.D. certificate or social security number provided in an application for an exemption filed with a chief appraiser is confidential and not open to public inspection. The information may not be disclosed to anyone other than an employee of the appraisal office who appraises property, except as authorized by Tax Code Section 11.48(b).

STEP 3: Property Information

Address, City, State and ZIP code

Legal Description of Property (if known) Appraisal District Account Number (if known)

STEP 4: Taxing Units Granting an Exemption

For each taxing unit identified, attach copies of documents reflecting official action of the governing body that provides for an exemption.

Blank lines for providing information about taxing units.

STEP 5: Questions About the Organization

- 1. Does the organization provide housing to the poor?
2. Does the organization provide housing for a fee?
3. Is the program under which housing is provided operated by United States Department of Housing and Urban Development?
4. Does the organization provide housing for more than a temporary period?
5. Are the resident individuals or a member of a family participating in a program to provide self-sufficiency?
6. Is the property leased from the United States or an U.S. agency?
If yes, is the lessee a non-profit organization?

STEP 6: Certification and Signature

By signing this application, you certify that the information provided in this application is true and correct to the best of your knowledge and belief.

print here Print Name Title

sign here Authorized Signature Date

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Penal Code Section 37.10.