

# GUADALUPE APPRAISAL DISTRICT



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## REQUEST FOR CANCELLATION OF EXEMPTIONS/DEFERRALS/CONFIDENTIALITY

IN OFFICE BY MAIL/E-MAIL FACSIMILE (FAX)

Account Number/PID: \_\_\_\_\_ Property Address: \_\_\_\_\_

Owner of Record: \_\_\_\_\_ **REQUESTOR\*:** \_\_\_\_\_ **PRINT ABOVE**

\*The person (s) listed above hereby request that the exemption(s) for the above account(s) be cancelled according to Section 11.43(i) of the Texas Property Tax Code. The Guadalupe County Tax Office shall collect the estimated taxes based on the correction of prior year appraisal rolls, if applicable. \*If Requestor is not the legal owner of the property, authorizing document giving Requestor legal authority to act on behalf of the legal owner is required, please attach documentation.

### TYPE OF EXEMPTION

HOMESTEAD (HS)

### YEAR /DATE CANCELLATION REQUEST EFFECTIVE

CANCEL FOR YEAR(S): \_\_\_\_\_

PERSON AGE 65 OR OLDER (OR SURVIVING SPOUSE)

CANCEL FOR YEAR(S): \_\_\_\_\_ **Tax Cert Needed** YES NO

100% DISABLED VETERAN HOMESTEAD (DVHS) (DVHSS)

CANCEL EFFECTIVE DATE: \_\_\_/\_\_\_/\_\_\_

DISABLED VETERAN (Section 11.22)

CANCEL FOR YEAR(S): \_\_\_\_\_

DISABLED PERSONS (DP) thru SS or Physician's Letter

CANCEL FOR YEAR(S): \_\_\_\_\_

TAX DEFERRALS 65 or DP (Circle)

CANCEL FOR YEAR(S): \_\_\_\_\_

REQUEST FOR CONFIDENTIALITY

CANCEL FOR YEAR(S): \_\_\_\_\_

OTHER

CANCEL FOR YEAR(S): \_\_\_\_\_

### REASON FOR CANCELLATION:

The person(s) referenced above further waives their right to protest this cancellation under the provisions of Chapter 41, of the Texas Property Tax Code, and waives the requirements of written notification of the cancellation by the Guadalupe Appraisal District.

DATE PROPERTY CEASED BEING PRIMARY RESIDENCE:

**KEEPING PROPERTY: YES NO**

OWNER (S) / REQUESTOR SIGNATURE

DATE

OWNER(S) MAILING ADDRESS (FOR TAX PURPOSES ONLY)

DAYTIME TELEPHONE NUMBER

CITY STATE ZIP

EMAIL

PUBLIC SERVICE ASSISTANT'S INITIALS

**\*PLEASE NOTE: THE MAILING ADDRESS FOR THIS ACCOUNT WILL BE UPDATED  
PER THIS REQUEST\***