

# Residence Homestead Exemption Application

Form 50-114

Harris County Appraisal District

119-453-004-003  
Appraisal District Account Number (if known)

Are you filing a late application?  Yes  No Tax Year(s) for Application 2023, 24

**GENERAL INFORMATION:** Property owners applying for a residence homestead exemption file this form and supporting documentation with the appraisal district in each county in which the property is located (Tax Code Sections 11.13, 11.131, 11.132, 11.133, 11.134 and 11.432). **Do not file this form with the Texas Comptroller of Public Accounts.**

### SECTION 1: Exemption(s) Requested (Select all that apply.)

Do you live in the property for which you are seeking this residence homestead exemption?  Yes  No

General Residence Homestead Exemption  Disabled Person  Person Age 65 or Older (or Surviving Spouse)

100 Percent Disabled Veteran (or Surviving Spouse) Is the disability a permanent total disability as determined by the U.S. Department of Veterans Affairs under 38 C.F.R. Section 4.15?  Yes  No

Surviving Spouse of an Armed Services Member Killed or Fatally Injured in the Line of Duty  Surviving Spouse of a First Responder Killed in the Line of Duty

Donated Residence of Partially Disabled Veteran (or Surviving Spouse) \_\_\_\_\_ Percent Disability Rating \_\_\_\_\_

Surviving Spouse: \_\_\_\_\_ Name of Deceased Spouse \_\_\_\_\_ Date of Death \_\_\_\_\_

Cooperative Housing: Do you have an exclusive right to occupy this property because you own stock in a cooperative housing corporation?  Yes  No

If yes, state name of cooperative housing corporation: \_\_\_\_\_

Were you receiving a residence homestead exemption on your previous residence?  Yes  No

Are you transferring an exemption from a previous residence?  Yes  No

Are you transferring a tax limitation?  Yes  No

Previous Residence Address, City, State, Zip Code \_\_\_\_\_ Previous County \_\_\_\_\_

### SECTION 2: Property Owner/Applicant (Provide information for additional property owners in Section 5.)

Select One:  Single Adult  Married Couple  Other (e.g., individual who owns the property with others)

Wendy H. Lassiter  
Name of Property Owner 1 Birth Date\* (mm/dd/yyyy) \_\_\_\_\_ Driver's License, Personal ID Certificate or Social Security Number\*\* \_\_\_\_\_

513-423-8229  
Primary Phone Number (area code and number) Email Address\*\*\* \_\_\_\_\_ Percent Ownership Interest \_\_\_\_\_

James M. Lassiter  
Name of Property Owner 2 Birth Date\* (mm/dd/yyyy) \_\_\_\_\_ Driver's License, Personal ID Certificate or Social Security Number\*\* \_\_\_\_\_

(e.g., Spouse, Co-Owner/Individual) 513-431-3894  
Primary Phone Number (area code and number) Email Address\*\*\* \_\_\_\_\_ Percent Ownership Interest \_\_\_\_\_

Applicant mailing address (if different from the physical address) \_\_\_\_\_

### SECTION 3: Property Information

7-20-2023 Date you acquired this property 9-1-2023 Date you began occupying this property as your principal residence

20310 Sweetgum Way, Cypress Harris 77433  
Physical Address (i.e. street address, not P.O. Box), City, County, ZIP Code

Legal Description (if known) Lot 3 Block (4) of Trails of Fairfield, Section (1) an addition in Harris County, TX according to the map or Plat Thereof, recorded in Film Code No. 397115 of the map records of Harris County Texas

Is the applicant identified on deed or other recorded instrument?  Yes \_\_\_\_\_ Court record/filing number on recorded deed or other recorded instrument, if available \_\_\_\_\_

No If no, required documentation must be provided. (see important information)

Is the property for which this application is submitted an heir property (see Important Information)?  Yes  No

Do other heir property owners occupy the property?  Yes (affidavits required)  No

**SECTION 3: Property Information (Continued)**

N/A  
 Manufactured Home Make \_\_\_\_\_ Model \_\_\_\_\_ ID Number \_\_\_\_\_  
 Is any portion of the property for which you are claiming a residence homestead exemption income producing? .....  Yes  No  
 If yes, indicate the percentage of the property that is income producing: \_\_\_\_\_ percent  
 Number of acres (or fraction of an acre, not to exceed 20 acres) you own and occupy as your principal residence: \_\_\_\_\_ acres

**SECTION 4: Waiver of Required Documentation**

Indicate if you are exempt from the requirement to provide a copy of your driver's license or state-issued personal identification certificate.

I am a resident of a facility that provides services related to health, infirmity or aging.  
 \_\_\_\_\_  
 Facility Name and Address

I am certified for participation in the address confidentiality program administered by the Office of the Texas Attorney General under Code of Criminal Procedure Chapter 58, Subchapter B.

Indicate if you request that the chief appraiser waive the requirement that the property address for exemption corresponds to your driver's license or state-issued personal identification certificate address:

I am an active duty U.S. armed services member or the spouse of an active duty member.  
 I hold a driver's license issued under Transportation Code Section 521.121(c) or 521.1211. Attached is a copy of the application for that license.

**SECTION 5: Provide Additional Information Here (If any)**

\_\_\_\_\_

\_\_\_\_\_

If you own other residential property in Texas, please list the county(ies) of location.

\_\_\_\_\_

\_\_\_\_\_

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 APR 01 2024  
 HCAD ASSISTANCE  
 INFORMATION & FRONT COUNTER

**SECTION 6: Affirmation and Signature**

I understand if I make a false statement on this form, I could be found guilty of a Class A misdemeanor or a state jail felony under Penal Code Section 37.10.

I, Wendy H. Lassiter , owner  
James M. Lassiter , co-owner  
 Property Owner/Authorized Representative Title/Authorization , swear or affirm the following:

1. that each fact contained in this application is true and correct;
2. that I/the property owner meet(s) the qualifications under Texas law for the residence homestead exemption for which I am applying; and
3. that I/the property owner do(es) not claim an exemption on another residence homestead or claim a residence homestead exemption on a residence homestead outside Texas.

**sign here**  Wendy H. Lassiter 4-1-2024  
James M. Lassiter 4-1-2024  
 Signature of Property Owner/Applicant or Authorized Representative Date

\* May be used by appraisal district to determine eligibility for persons age 65 or older exemption or surviving spouse exemptions (Tax Code §11.43(m))

\*\* Social security number disclosure may be required for tax administration and identification. (42 U.S.C. §405(c)(2)(C)(i); Tax Code §11.43(f)) A driver's license number, personal identification number or social security number disclosed in an exemption application is confidential and not open to public inspection, except as authorized by Tax Code §11.48(b).

\*\*\* May be confidential under Government Code §552.137; however, by including the email address on this form, you are affirmatively consenting to its release under the Public Information Act.



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