



COLLIER COUNTY PROPERTY APPRAISER

VICKIE A. DOWNS

HOMESTEAD REMOVAL FORM

Parcel Number _____ Date _____

Address _____

This is to certify that I no longer qualify for Homestead Exemption for the _____ tax year. Date moved: _____

Reason for removal: _____

New address: _____

Mailing address if different from above: _____

Names of individuals remaining at property: _____

Printed Name _____ Printed Name _____

Signature _____ Signature _____

Phone _____

STATE of _____
COUNTY of _____

SUBSCRIBED AND SWORN TO before me this _____ day of _____, _____.
_____ personally known to me or _____ who produced _____
as identification.

Notary Public

Commission Stamp

Received By: _____

Mailed in _____ or In person _____

Date: _____

Entered By: _____

Date: _____