

CITY OF TEMPLE TERRACE FIRE DEPARTMENT

Risk Reduction Division

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APPLICATION FOR RESIDENTIAL RENTAL HOUSING PERMIT EXEMPTION

PROPERTY INFORMATION

Property Address:

Parcel ID – PIN # :

HCPA Folio # :

OWNER INFORMATION

Name of Owner(s):

Owner's Address:

City/State/ Zip:

Property Owner Home Phone:

Business Phone:

Property Owner E-Mail Address:

EXEMPTION CATEGORIES

Please **select** the exemption request category applicable to the above-listed dwelling:

Dwelling unit is the primary residence of the property owner(s); however it does not have homestead exemption. I agree to provide proof of residency by submittal of a copy of one of the following exhibits: *(check one and submit)*

- Voter registration
- Driver's License issue or State ID card
- License tag registration on any motor vehicle owned by owner/applicant
- Address-of-record as listed on federal income tax returns filed by owner/applicant

Dwelling Unit, with or without homestead exemption, when occupied by property owner(s) and rent-paying tenant(s); and, when in no case does the combined occupancy include more than three (3) unrelated persons, one of whom is the property owner.

EXEMPTION CERTIFICATIONS

I certify that this property is not in violation of the City's Minimum Housing Code; and that at no time shall more than three (3) unrelated persons reside within the above-listed dwelling. I agree to provide a list of occupants upon request if needed for verification of residency and/or kinship of occupants.

I further certify that the information given in this application is complete and accurate, and I understand that to make false or fraudulent statements within this application may result in denial of exemption and possible legal action. **If granted an exemption, I agree to operate within the city and state laws, and to notify the City if there are changes to the information provided in this application. I also certify that I am the property owner or owner's legal agent.**

Owner's Signature

Print Name

Date