



STATE OF FLORIDA  
**LEE COUNTY PROPERTY APPRAISER**  
 MATTHEW H. CALDWELL



**Mailing Address:**  
 P.O. Box 1546  
 Fort Myers, Florida 33902-1546  
**Telephone:** (888) 721-0510

**Physical Address:**  
 2480 Thompson Street  
 Fort Myers, Florida 33901-3074  
**Website:** [www.leepa.org](http://www.leepa.org)

**LEE COUNTY FLORIDA EXEMPTION REMOVAL REQUEST**

The property owner requesting removal **MUST** be the exemption applicant. Non - applicants cannot request removal of an exemption. In order to rescind the homestead exemption status in its entirety, all exemption applicants must agree to do so by completing and signing this form. Submit the completed form in person, via email to [exemptions@leep.org](mailto:exemptions@leep.org), fax to 239-533-6038, or by US Mail. For questions regarding this form, please call 888-721-0510.

Name of Applicant 1 requesting removal of exemption(s): \_\_\_\_\_

Name of Applicant 2 requesting removal of exemption(s): \_\_\_\_\_

This request for removal of exemption(s) applies to Parcel ID: \_\_\_\_\_

Enter the site address: \_\_\_\_\_

Enter your new mailing address: \_\_\_\_\_

This request for removal of exemption(s) is effective January 1, (*please enter the effective tax year*): \_\_\_\_\_

Select exemption(s) to be removed:  Homestead  Widow/Widower  VA Disability  Disability  Other  
*(If you checked Other, please describe):* \_\_\_\_\_

Select the reason(s) below that you no longer qualify for the exemption(s):

- I and/or my spouse claim a tax exemption/credit elsewhere. (*Enter the address of the property on the next line*):  
 \_\_\_\_\_
- Owner/applicant has elected to retain the 10% cap on non-homestead property in lieu of applying for the homestead exemption and Save Our Homes cap benefit.
- Owner/applicant requests removal of exemption and SOH benefit (*if applicable*) to verify exemption status for Lee County School District Student Assignment Office.
- The property is no longer my/our permanent residence. (*Enter the date you moved*): \_\_\_\_\_
- The property is rented. (*Enter dates indicating the term of the rental period*): \_\_\_\_\_
- Other – must state reason and effective date: \_\_\_\_\_

**NOTICE:** Removal of the exemption(s) may cause the property to be assessed at full market value and you could lose all exemption and **Save Our Homes** differential benefits.

\_\_\_\_\_  
 Signature of Owner/Applicant 1                      Date                      Email Address (or) Daytime Phone No.

\_\_\_\_\_  
 Signature of Owner/Applicant 2                      Date                      Email Address (or) Daytime Phone No.