

2018 PERMANENT HOMESTEAD EXEMPTION APPLICATION  
**MOBILE HOME**

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INFORMATION FROM DEED

CONVEYANCE BOOK/PAGE OR INSTRUMENT NUMBER \_\_\_\_\_ RECORDING DATE \_\_\_\_\_

SELLER'S/DONOR'S NAME \_\_\_\_\_

PURCHASER'S/DONEE'S NAME \_\_\_\_\_

PROPERTY DESCRIPTION \_\_\_\_\_

\_\_\_\_\_ GEOGRAPHIC # \_\_\_\_\_ -

APPLICANT'S MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE: HOME \_\_\_\_\_ WORK/CELL \_\_\_\_\_

PROPERTY ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

**IF YOU OWN OTHER PROPERTY IN CADDO PARISH, PLEASE COMPLETE A CHANGE OF ADDRESS FORM.**

(1) DID YOU HAVE A PERMANENT HOMESTEAD EXEMPTION FOR 2017? \_\_\_\_\_

(2) IF ANSWER TO (1) IS YES, WHAT WAS THE ADDRESS? \_\_\_\_\_

(3) HAVE YOU ALREADY SIGNED A HOMESTEAD EXEMPTION FOR 2018? \_\_\_\_\_  
IF ANSWER TO (3) IS YES, WHAT WAS THE ADDRESS? \_\_\_\_\_

(5) DATE YOU PURCHASED MOBILE HOME \_\_\_\_\_ MAKE/MODEL \_\_\_\_\_

YEAR \_\_\_\_\_ SIZE \_\_\_\_\_ X \_\_\_\_\_ COLOR \_\_\_\_\_ SKIRTED \_\_\_\_\_ A/C \_\_\_\_\_

BEDROOMS \_\_\_\_\_ BATH(S) \_\_\_\_\_ OTHER \_\_\_\_\_

(6) FROM WHOM DID YOU PURCHASE THE MOBILE HOME? \_\_\_\_\_

(7) WHERE WAS THE MOBILE HOME LOCATED LAST YEAR? \_\_\_\_\_

APPLICANT'S STATEMENT: I/WE DO DECLARE THAT THIS IS MY/OUR FAMILY HOME AND I/WE DO OWN AND OCCUPY SAME FOR THIS PURPOSE. I/WE ARE NOT CLAIMING ANY OTHER PROPERTY AS MY/OUR HOME. IN ACCORDANCE WITH R. S. 47:1703.1, AND I/WE FURTHER UNDERSTAND IF ANY CHANGE IN OWNERSHIP OCCURS OR IF I/WE MOVE FROM THIS PROPERTY THAT IT IS REQUIRED THAT I/WE NOTIFY YOUR OFFICE WITHIN 60 DAYS OF EITHER OF THESE CHANGES. (SEE NOTE TO LEFT)

NOTE: REVISED STATUTE TITLE 14, SECTION 133 MAKES IT A FELONY FOR ANY PERSON TO FILE ANY FALSE PUBLIC RECORD WITH KNOWLEDGE OF ITS FALSITY.

DATE \_\_\_\_\_ APPLICANT'S SIGNATURE \_\_\_\_\_

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20 \_\_\_\_\_ GEOGRAPHIC # \_\_\_\_\_ - WERE IMPS ASSESSED IN 20\_\_? \_\_\_\_\_

APPLICANT'S NAME \_\_\_\_\_ DATE MAILED \_\_\_\_\_

TYPE: OWNER \_\_\_\_\_ USUFRUCT \_\_\_\_\_ H-BALANCE AMOUNT \_\_\_\_\_

PRIMARY ACCOUNT # \_\_\_\_\_ LAND \_\_\_\_\_ IMPS \_\_\_\_\_

REMARKS \_\_\_\_\_

APPLICATION TAKEN BY: \_\_\_\_\_