

Marion County Board of County Commissioners

Community Services

2710 E. Silver Springs Blvd. Ocala, FL 3447 Phone: 352-671-8770 Fax: 352-671-8769

Low Income Non-Ad Valorem Assistance Program 2024

You may be eligible for assistance to pay certain non-ad valorem tax assessments (Fire, Solid Waste Disposal, and Clean Water) if you meet the following criteria:

- 1. You are a Marion County homeowner and your property is homesteaded.
- 2. Your property is 3 acres or less in size.
- 3. Your property taxes are current and paid up to date.
- 4. Your household income is at or below 100% of current Federal Poverty Guidelines.
- 5. You do not have sufficient income and assets to pay your taxes.

If you believe that you meet the criteria for this assistance, you may complete an application and include the required documentation to verify income and assets. Once a complete application is received, it will be reviewed to determine eligibility. **Make an appointment for this review, do not drop off or mail the application** <u>without an appointment</u>. It will not be accepted. 352-671-8770

If your application is approved, a check will be delivered to the Tax Collector to pay your Non-Ad-Valorem Assessment portion of your taxes. If there is an amount due in addition to the Non-Ad-Valorem Assessment, a pre-deposit account will be created to hold the funds in escrow until such time as the balance is paid or the due date expires.

Timeline:

- Applications for Tax Assistance Available: July 1, 2024
- Deadline to Submit Application:
- Notification of Eligibility Mailed:
- Checks ready for disbursement:

Applications are available at:

1. <u>Download an application from the Marion County Website at:</u>

https://www.marionfl.org/communityservices

- <u>Pick up an application:</u> Marion County Community Services Department 2710 E Silver Springs Blvd., Ocala, FL 34470
- 3. <u>Call to have an application **emailed** to you:</u> (352) 671-8770

For any questions, please call the Community Services Department at 352-671-8770

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August 30, 2024 Between Oct. $2 - 30^{\text{th}}$, 2024 After Nov. 5^{th} , 2024



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MARION COUNTY, FLORIDA		
INCOME LIMITS ADJUSTED TO FAMILY SIZE		
2024 POVERTY GUIDELINES HUD		
eff.1/25/2024		
100%		
Federal Poverty		
Guidelines		
1 PERSON	\$15,060.00	
2 PERSON	\$20,436.00	
3 PERSON	\$25,812.00	
4 PERSON	\$31,200.00	
5 PERSON	\$36,576.00	
6 PERSON	\$41,952.00	
7 PERSON	\$47,340.00	
8 PERSON	\$52,716.00	
9 PERSON	\$58,092.00	
10 PERSON	\$63,468.00	

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LOW-INCOME, NON-AD VALOREM ASSISTANCE PROGRAM 2024

APPLICANT(S) NAME(S):				
APPLICANT(S) MARITAL STATUS:		(Verificatio	n required	d for divorced or widowed
STREET ADDRESS:			PHONE:	()
CITY:	ZIP CODE:	PARCEL #: _		
HOMESTEAD EXEMPTION? YES	NO	NUMBER OF ACRES	:	
TAXES PAID THRU A MORTGAGE COM	PANY? YES	NO		
MAILING ADDRESS (if different from al	oove):			

HOUSEHOLD MEMBERS:

FULL NAME	RELATIONSHIP	
	HEAD OF HOUSEHOLD	

HOUSEHOLD INCOME: LIST THE AMOUNT RECEIVED ANNUALLY

HOUSEHOLD MEMBERS	EMPLOYMENT	BENEFITS	OTHER	TOTAL INCOME
	INCOME	INCOME	INCOME	
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$

ASSETS/OTHER INCOME: (Checking/savings accounts, certificates of deposit, equity of and rental income from properties other than a primary residence, cash surrender value of life insurance, the value of vehicles in excess of one, stocks, bonds and the value of any beneficial interest in a trust, dividends, interest, income from estates or trusts and contributions from any other source.)

DESCRIPTION	CASH VALUE	ANNUAL
		INCOME
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
TOTAL EACH COLUMN	\$	\$

CERTIFICATIONS & WAIVER OF PRIVACY:

In	itials:	
App.	Co-App.	
		I understand that all information in this application, including supporting documentation is given for the purpose of obtaining assistance under the Marion County Non-Ad Valorem Tax Assistance program and is true and complete to the best of my knowledge and belief. I also understand that Self-certifications may be subject to further verification and all sources of income and assets must be included when determining income.
		I understand that all information provided in this application is subject to Florida's public record laws. I understand that Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. I am a U.S. Citizen or Permanent Resident.

Applicant

Date

Co-Applicant

Date

DOCUMENTS REQUIRED

- 1. Florida Driver's License or ID Card showing current address
- 2. Verification of Marital Status (*The state of Florida does not recognize legal separation.)
 - Divorce Decree
 - Death Certificate
 - ____ Affidavit of Marital Status (Single-never married)
 - ____ Proof of incarceration or medical institution (nursing home etc.) of the missing spouse/co-owner
- 3. Verification of Income provide the most current copies of the following documents as applicable:
 - Pay Stub last four consecutive weeks
 - <u>Current Proof of Income</u>: Social Security (SSI, SSA, SSDI) Proof of Income Letter, Call Soc. Sec. 1-800-772-1213 to Request a Proof of Income Statement (not for tax purposes) via the automated system.
 - VA Pension Statement, and/or Other Pension Statement)
 - ____ Award Letter (workers' compensation, unemployment)
 - ____ Alimony / Divorce papers / Child Support Order
 - ____ Self-employed members only tax returns last two years
- 4. Verification of Assets
 - ____ Bank statements all pages, all accounts last two months
 - ____ Rental Property documentation of rent received (lease)
 - ____ Cash surrender value statement for any insurance or investments (letter from the company)
 - ____ Property Appraisers report showing the market value of any <u>additional properties</u> owned in addition to your homestead.