

**ORANGE COUNTY SOLID WASTE PROGRAMS FEE (SWPF)
ASSISTANCE APPLICATION
Year 2016**

Supplemental Application when Applying for Homestead Exemption

This form should only be used when applying for Homestead Exemption.
All documentation required for the Homestead Exemption Application must be completed
in order for this application to be processed.

APPLICANT

CO-APPLICANT

Full Name	_____	_____
Residence Address	_____	_____
City, State, Zip	_____	_____
Parcel ID (PIN)	_____	_____
Telephone Number	_____	_____

What percentage of ownership does applicant(s) have in the property? _____

If not 100%, list the name of other owner(s). _____

Is the property the permanent residence of the applicant(s)? _____

All information is subject to verification with the North Carolina Department of Revenue.

AFFIRMATION OF CLAIMANT:

I hereby affirm to the best of my knowledge and belief that all of the information I have furnished in connection with this application is true and complete.

Applicant's Signature _____ **Date submitted** _____

Return completed application to:

Orange County Tax Office
PO Box 8181
Hillsborough, NC 27278-8181

Contact 919-245-2100, option 2 for questions.

FOR OFFICE USE ONLY

_____	_____	_____
Verified/Approved by	Parcel Identification Number	Account Number
Approved _____	Denied _____	

Tax Administration Director's Signature