DISABLED PERSONS CLAIM FOR EXCLUSION OF NEW CONSTRUCTION FOR OCCUPIED DWELLING



This claim is for the exclusion from reassessment of any construction to make an existing dwelling more accessible to a severely and permanently disabled person who is a permanent resident of the dwelling. Only construction completed on or after June 6, 1990 is eligible. The exclusion does not apply to accessibility improvements and features

Tom J. Slavich San Benito County Assessor 440 Fifth St. Rm. 108 Hollister, CA 95023-3893 Tel: 831-636-4030 Fax: 831-636-4033 www.cosb.us/government/assessor

TO BE COMPLETED BY THE CLA	AIMANT (DISABLED PERSON, SPOUSE OR LEGAL GUARDIAN)
	PRINT NAME OF DISABLED PERSON (if different)
DDRESS OF PROPERTY WITH NEW CONSTRUCTION	ASSESSOR'S PARCEL NUMBER
ESCRIBE THE IMPROVEMENTS MADE	
ATE CONSTRUCTION COMPLETED	
	CERTIFICATION
	th <mark>e l</mark> aw <mark>s</mark> of the State o <mark>f California that</mark> the disabled <mark>pe</mark> rson named above permanently
	onstruction was to make the residence more accessible to the disabled person.
LAIMANT'S SIGNATURE	DAYTIME PHONE NUMBER DATE
MAIL ADDRESS	
то	BE COMPLETED BY PHYSICIAN
he claimant named above is applying to have a po	rtion or all of the construction, installation or modifi cation of a dwelling excluded fro
	essible to a severely and permanent disabled person. For purposes of this tax bene
	d person as any person who has a physical disability or impairment which affects sig
	results in a functional limitation as to employment or substantially limits one or mo
· · · · · · · · · · · · · · · · · · ·	een diagnosed as permanently affecting the person's ability to function.
AME OF DISABLED PERSON (please print)	
LEASE IDENTIFY THE SPECIFIC DISABILITY-RELATED REQUIREMENTS	
LEASE IDENTIFY THE SPECIFIC DISABILITY-RELATED REQUIREMENTS	SINE CESSITATING ACCESSIBILITY IMPROVEMENTS OR FEATURES
am a licensed 🗌 Physician 🗌 Surgeon My s	specialty is
am a licensed 🗌 Physician 🗌 Surgeon My s	
am a licensed 🗌 Physician 🗌 Surgeon My s	DECLARATION
	DECLARATION
I declare that the disabled person name	
I declare that the disabled person name	DECLARATION ed above is severely and permanently disabled according to the definition

PHYSICIAN'S NAME (print or type)

PHYSICIAN'S PHONE NUMBER)

(



GENERAL INFORMATION

California law provides that certain construction, installations, or modifications of **existing** single- or multiplefamily dwellings can be excluded from increases in property taxation if the work is performed to make the dwelling more accessible to a severely and permanently disabled person who is a permanent resident of the dwelling. This exclusion does **not** apply to accessibility improvements and features that are usual or customary for comparable properties not occupied by disabled persons, but will apply only to those improvements or features that specifically adapt a dwelling for accessibility by a severely disabled person.

Revenue and Taxation Code section 74.3(b) defines a severely and permanently disabled person as any person who has a physical disability or impairment, whether from birth or by reason of accident or disease, including but not limited to any disability or impairment which affects sight, speech, hearing, or use of any limbs and which results in a functional limitation as to employment or substantially limits one or more major life activity of that person, and which has been diagnosed as permanently affecting the person's ability to function.

To qualify for this exclusion:

- The construction, installations, or modifications must be completed on or after June 6, 1990;
- The disabled person must be a permanent resident (not necessarily the owner) of the dwelling; and
- The dwelling must be occupied by the owner and therefore eligible for the homeowners' exemption.

To claim the exclusion, the disabled person, their spouse, or legal guardian must submit to the Assessor the following:

- A statement signed by a licensed physician or surgeon of appropriate specialty which certifies that the person is severely and permanently disabled as defined above. The statement must identify specific disability-related requirements necessitating accessibility improvements or features, and
- A statement that identifies the construction, installation, or modification that was in fact necessary to make the structure more accessible to the disabled person.

The Assessor may charge a fee to the disabled person or their spouse or legal guardian sufficient to reimburse the Assessor for the costs of processing and administering the statement.



