



*Fayette*  
COUNTY

"WHERE QUALITY  
IS A LIFESTYLE"

**TAX ASSESSOR**

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## REQUEST TO REMOVE HOMESTEAD EXEMPTION

Owners Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Parcel ID Number: \_\_\_\_\_

Property Address: \_\_\_\_\_

\_\_\_\_\_

Tax Year to Remove Homestead Exemption: \_\_\_\_\_

SELLING? Yes \_\_\_\_\_ No \_\_\_\_\_ RENTING? Yes \_\_\_\_\_ No \_\_\_\_\_

Reason for Removal: \_\_\_\_\_

Address of NEW PRIMARY RESIDENCE: \_\_\_\_\_

\_\_\_\_\_

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner's Printed Name: \_\_\_\_\_