

FAMILY HOMESTEAD

Authority: Section 1.05.00, Okaloosa County Land Development Code.

Purpose: To provide an opportunity and simplified procedure for the subdivision of land into lots or parcels to be used as a homestead by members of the same immediate family.

Applicability: The family homestead provision is a general exemption which allows a waiver of the residential density requirements of the Code for the conveyance of an individual parcel of property to be used solely as a family homestead by a child, step-child, adopted child, grandchild, sibling, adoption parent, step-parent, grand-parent, or parent of the owner of the property being conveyed. All other applicable Code requirements must be met for property conveyed in this manner. This exemption shall apply only to lots or parcels greater than one (1) acre in size when no more than four lots or parcels, including the "parent parcel", will be created from a "parent parcel."

Process: The Department may grant a family homestead exemption upon demonstration by an applicant that applicable code provisions have been met. In order for verification of compliance an applicant must submit: proof of ownership for the "parent parcel"; a survey or other drawing drawn to an acceptable scale which shows the configuration and dimensions of the "parent parcel" being subdivided as well as the configuration and dimensions of the new parcels being created, and; a completed application including verification and affidavit.

Fee: \$50.00

REVISED AUG 20, 2013-MR

OKALOOSA COUNTY
DEPARTMENT OF GROWTH MANAGEMENT
FAMILY HOMESTEAD VERIFICATION

1. Date: ____/____/____
2. Applicant: _____
3. Property Address: _____
4. Parcel ID Number: _____ - _____ - _____ - _____ - _____
5. Future Land Use (FLUM): _____ Zoning District: _____
6. Dimensional requirements: Minimum width: _____ ft Minimum square footage: _____
7. Proposed square footage (each lot): (1) _____ (2) _____ (3) _____
8. Setbacks: Front: _____ ft Side: _____ ft Rear: _____ ft
9. Number of proposed lots (including parent parcel): _____
10. Road frontage requirement: _____ ft

For Office Use Only

- Proof of ownership Survey, Sketch or drawing to scale Fee Agent authorization (if applicable)

Verified by: _____

Date: _____

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**OKALOOSA COUNTY
FAMILY HOMESTEAD EXEMPTION AFFIDAVIT**

STATE OF FLORIDA
COUNTY OF OKALOOSA

BEFORE ME, the undersigned authority, personally appeared

_____, who, after first being duly sworn
by me, under oath, deposes and says as follows:

1. My name is _____. I am over the age of eighteen years,
and I am fully competent to make this affidavit. I do hereby swear that all facts and statements
presented in this affidavit are true and correct and within my personal knowledge;

2. The applicant intends to convey property located at _____
_____, Property ID Number ____-____-____-____-____ as a family
homestead pursuant to the general exemptions to the Land Development Code (LDC) as prescribed
at Section 1.05.00, 1, LDC and does further understand that this exemption only applies to the
density requirements of the LDC, and that all other applicable requirements of the LDC must be
met for property conveyed in this manner;

3. I am the owner of record, or the owner's authorized representative, of the property described in
paragraph 2;

4. I understand that the Comprehensive Plan future land use designation for the property is
_____ and the zoning district designation is _____
_____.

5. I do hereby swear and affirm that the property being conveyed pursuant to the exemption specified in paragraph 2 will be used solely as a homestead as that term is defined at Chapter 192, Florida Statutes;

6. I do hereby swear and affirm that the property being conveyed pursuant to exemption specified in paragraph 2 is being conveyed as a family homestead to _____

_____ (name of family member) who is related to me as my

_____ (relationship);

7. I understand that the aforementioned exemption shall apply only for lots or parcels greater than one (1) acre in size when no more than four (4) homestead lots or parcels, including the “parent parcel”, will be created from a “parent parcel”, and;

8. I understand that this affidavit may be used as evidence in any legal proceeding brought before a tribunal of competent jurisdiction.

AFFIANT FURTHER SAYETH NAUGHT.

Applicant’s Printed Name: _____

Applicant’s Signature: _____ Date: _____

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____, 20____.

NOTARY PUBLIC

MY COMMISSION EXPIRES

STATE OF FLORIDA

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