

**AFFIDAVIT FOR HOMESTEAD EXEMPTION  
FOR SPECIALLY ADAPTED HOUSING**

Pursuant to 1978 PA 261, Section 211.7b, MCL

An affidavit must be filed **ANNUALLY** between December 31  
of the prior year and the close of the March Board of Review

State of Michigan, County of \_\_\_\_\_ Year \_\_\_\_\_,

being duly sworn, deposes and claims to be a soldier or sailor who was discharged under honorable conditions with a service connected disability, and has provided proof of said disability in the form of a certificate from the United States Veteran's Administration, or its successor, certifying the soldier or sailor is receiving or has received pecuniary assistance due to disability for specially adapted housing\*, or is the unremarried, surviving spouse of the qualified veteran. Deponent further claims to own and occupy as a homestead, certain specially adapted housing\* in the

City or Township of \_\_\_\_\_ County of \_\_\_\_\_

State of Michigan, described as follows:

Date homestead was acquired: \_\_\_\_\_

- Check if the certificate is on file (certificate must accompany first filling)
- Check if you are a qualified Veteran
- Check if you are the unremarried, surviving spouse of a qualified veteran

Sign Here: \_\_\_\_\_

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

Sworn and subscribed to before me this \_\_\_\_\_ day of \_\_\_\_\_ year \_\_\_\_\_

Name of Notary \_\_\_\_\_ Address \_\_\_\_\_

Notary Public of \_\_\_\_\_ County, State of \_\_\_\_\_

My Commission expires \_\_\_\_\_

Name of Person accepting this Form \_\_\_\_\_

Parcel Code Number(s) \_\_\_\_\_

\*Specially adapted housing would include but not limited to such items as: specially designed bathing facilities and toilets, lowered counter tops and sinks, extra wide doors. The veteran must have or is receiving pecuniary assistance for specially adapted housing.