

## Board of County Commissioners Leon County, Florida

### Policy No. 03-18

Title: Grant for Active Duty Military Personnel

Date Adopted: October 23, 2007

Effective Date: October 23, 2007

Reference: None

Policy Superseded: Policy No. 03-18 "Grant to Active Duty Military Personnel" adopted November 18, 2003; Policy No. 03-18 "Grant for Active Duty Military Personnel" revised March 28, 2006

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It shall be the policy of the Board of County Commissioners of Leon County, Florida, that Policy 03-18, "Grant for Active Duty Military Personnel" revised on March 28, 2006 is hereby amended and a revised policy adopted in its place, to wit:

#### I. Intent and Purpose

That all persons serving in the United States military who reside in Leon County are eligible to apply for a grant equal to that portion of their Leon County Ad Valorem property taxes on their owner-occupied residence reflecting the time served on active duty in direct support of a named United States military conflict or national emergency declared by the President of the United States per Title 10, U.S.C. Alternately, a grant is available to Leon County residents who are not property owners, but who meet all other eligibility criteria.

#### II. Eligibility

- A. The person making application, in order to qualify, shall be a member of the United States military or a member of the United States Reserve or National Guard who has been called to active duty during the preceding calendar year of January 1 through December 31 for a named United States military conflict or in support of a national emergency declared by the President of the United States per Title 10, U.S.C.
- B. The Grant is also available to members of the United States Reserve or National Guard for time served on active duty, or in active duty for training, when active duty training is in preparation for, and followed by, service in a named military conflict or in support of a national emergency declared by the President of the United States per Title 10, U.S.C. The Grant applies to Leon County property owners who are members of a unit in another state, in addition to those in a Florida unit. Only one refund may be granted to each household per calendar year.

- C. Alternately, a \$600 annualized Grant is available to the deployed/mobilized military population who reside in Leon County, but are not Leon County property owners. The \$600 Grant will assist deployed/mobilized Leon County service members in meeting expenses caused by their separation from jobs and families. For deployed/mobilized service members who are Leon County property owners, the Grant payable by Leon County will be the greater of either the ad valorem property tax refund or the \$600 Grant. Either the ad valorem property tax refund or the \$600 Grant, but not both, is available during a calendar year.

III. Grant Procedures

- A. The application period shall be between January 1 and December 31 of each calendar year, starting with October 1, 2002. The application period for the first year of this grant program was extended through June 30, 2004, to enable participation by those currently on active duty in a current military conflict.
- B. The amount of the refund shall not exceed the Ad Valorem property taxes assessed by Leon County on the tax bill received in November of each calendar year. Such Grant shall not be eligible to pay the taxes imposed by any other unit of government, nor any assessments, fees, or other charges of any nature whatsoever.
- C. The Grant payment equal to Leon County Ad Valorem property taxes, or a \$600.00 annualized Grant, shall be based upon an application form (attached) which must be submitted by the qualifying applicant or specified agent to the Leon County Veteran Services Division, 918 Railroad Avenue, Tallahassee, Florida, 32310, and the Grant shall be in strict accord with the policy set forth herein. The deadline for filing an application is December 31 of the calendar year following the year of release or return from active duty. The application must be accompanied by appropriate documentation that clearly defines the period of service; e.g., copy of DD Form 214 or equivalent document, copy of official orders specifying actual dates of service, copy of paid travel pay vouchers with attached orders, letter from the respective unit commander or personnel office stating the active duty period, etc.
- D. If the application is submitted by the military servicemember=s specified agent, a copy of the legal vehicle authorizing the specified agent to act on behalf of the servicemember must accompany the application. These grants are subject to budgetary appropriation on an annual basis by the Board of County Commissioners of Leon County.

*Revised 10/23/2007*



MILITARY PERSONNEL GRANT APPLICATION

Name :

Address:

Phone Number:

Tax Parcel I.D. No. (if applicable):

Branch of Military Service (Circle One): Army Navy Air Force Marine Corps Coast Guard  
National Guard Army Reserve Navy Reserve Air Force Reserve Marine Corps Reserve

Name of Military Conflict:

Dates of Service: Month/Day/Year \_\_\_/\_\_\_/\_\_\_\_\_ through Month/Day/Year \_\_\_/\_\_\_/\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

NOTE: The application must be accompanied by: 1) a copy of the tax bill for the above-referenced parcel for refund payment of Leon County Ad Valorem property taxes, if applicable; 2) appropriate documentation that clearly defines the period of service; e.g., copy of the DD Form 214 or equivalent document, copy of official orders specifying actual dates of service, copy of paid travel pay vouchers with attached orders, or a letter from the respective unit commander or personnel office stating the active duty period; and 3) a copy of the legal vehicle authorizing a specified agent to act on behalf of the service member, if applicable.

SUBMIT APPLICATION TO:  
Leon County Veteran Services Division  
918 Railroad Avenue  
Tallahassee, Florida 32310  
Questions may be directed to (850) 606-1940

STATE OF FLORIDA  
COUNTY OF LEON

The foregoing instrument was acknowledged before me this \_\_\_ day of \_\_\_\_\_, 20\_\_\_,  
by \_\_\_\_\_ who is personally known to me or who has produced  
\_\_\_\_\_ as identification, and who did take an oath.

\_\_\_\_\_  
(print name) NOTARY PUBLIC

SEAL

My Commission expires: