



# AFFIDAVIT

I, \_\_\_\_\_, one of the deeded owners,  
of parcel number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_.

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

Hereby agree that, \_\_\_\_\_ has the right to reside at the  
above-mentioned property address thru out the term of his/her natural life and is  
responsible for all real estate taxes attributed to said property address.

This Affidavit is to be used only for the purpose so that the above-mentioned parcel will  
qualify for the Taxpayer Relief Act, Act 1 of 2006 a/k/a the Homestead/Farmstead Act,  
and cannot be used for any other purpose.

\_\_\_\_\_ Date \_\_\_\_\_  
(Property Owner Signature)

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

Of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_

Notary Signature

My Commission Expires

\_\_\_\_\_

\*\*\* ATTACH THIS FORM TO THE HOMESTEAD/FARMSTEAD APPLICATION AND RETURN BEFORE MARCH 1<sup>ST</sup> DEADLINE  
TO THE JEFFERSON COUNTY ASSESSMENT OFFICE, 200 MAIN STREET BROOKVILLE, PA 15825\*\*\*