

Christopher P. Guerin, CLA



LISA H. TATE, CLDA
CHIEF DEPUTY

ASSESSOR

PARISH OF WEST BATON ROUGE
P.O. BOX 76
PORT ALLEN, LOUISIANA 70767-0076
www.wbrassessor.org

850 8TH STREET
COURTHOUSE BLDG., ROOM 11
PORT ALLEN, LOUISIANA
PHONE (225)344-6777
FAX (225) 344-6779

Permanent Homestead Exemption Application

Date of application: _____ Date occupied: _____

Owner name: _____

Physical address: _____

Mailing address (if different): _____

Legal description:

1st floor living area (sq.ft.) _____ (do not include porches, garages, shops, etc....)

2nd floor living area (sq.ft.) _____

Number of bedrooms: _____, Number of baths: _____

Outdoor Kitchen Swimming Pool Other Buildings (Workshop, Storage, Pool House etc.)

I hereby own, occupy and claim homestead exemption on the property described herein in accordance with provisions of La. Const. Art. 7 20 and Louisiana Law, and hereby certify I am not claiming any other property as my homestead for purposes of homestead exemption. I declare that under the penalties for filing false reports that this return has been examined by me to the best of my knowledge and belief is a true, correct and complete return and application.

Signature of owner: _____

Telephone (home): _____ Telephone (work): _____

Email address: _____