

MEASURE E EMERGENCY RESPONSE & INFRASTRUCTURE SPECIAL PARCEL TAX INITIATIVE ORDINANCE  
TAX YEAR 2026-27 LOW-INCOME SENIOR-OWNED PARCEL TAX EXEMPTION FORM

For additional information: <https://fire.lacounty.gov/Measure-E/> or (323) 881-6151

Owner Name:	Phone No:
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Street Address:

City, State, Zip:

Assessor's ID No. (AIN):

<b>Verification of Residence</b> Check only <b>ONE</b> from the below and attach a copy. The site address and owner's name on your Property Tax Statement <b>MUST</b> match the documentation provided. <input type="checkbox"/> California Driver's License or California ID ( <b>REDACT</b> license number or ID number <b>ONLY</b> ) <input type="checkbox"/> Utility Service Bill (gas, water, electric, etc.) <input type="checkbox"/> Official Government Mail (CalWorks, Social Security, etc.)	<b>Verification of Ownership</b> Check only <b>ONE</b> from below and attach a copy. If the property is under a trust, provide documentation that verifies whether you are a trustee or a beneficiary. <input type="checkbox"/> Property Tax Bill <input type="checkbox"/> Trust
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**Verification of Income**  
Check only **ONE** from the below and attach a copy. W2s will **NOT** be accepted.

<input type="checkbox"/> 2025 Federal Income Tax Return	<input type="checkbox"/> 2025 Social Security Form SSA-1099
<input type="checkbox"/> 2025 State Income Tax Return	<input type="checkbox"/> Other

(Note: If submitting a federal or state tax return, attach **ONLY** the page(s) showing your name(s) and Adjusted Gross Income. **DO NOT** include all pages. Please **REDACT** your Social Security number(s) on the Income Tax Return or SSA-1099.)

The total number of persons in my household is \_\_\_\_\_

Include **ALL** household income.

If applicable, state your household's 2025 Adjusted Gross Income from your Federal/State tax return \$ \_\_\_\_\_

Otherwise, please state your annual 2025 Social Security benefits or any other sources of benefit income \$ \_\_\_\_\_

**Verification of Age**  
Check only **ONE** of the following and attach a copy. You **MUST** be 62 of age by June 30, 2026, to qualify.

<input type="checkbox"/> California Driver's License or California ID (If used for verification of residency, it also serves as verification of age)
<input type="checkbox"/> Birth Certificate

I will be \_\_\_\_\_ years old by June 30, 2026.

WHEN COMPLETED, PLEASE ATTACH SUPPORTING DOCUMENT(S) AND MAIL TO:

**Los Angeles County Fire Department, Attn: Planning Division, 1320 N. Eastern Ave, Los Angeles CA 90063**

APPLICANTS THAT DO NOT SUBMIT THE ABOVE DOCUMENT(S) WILL NOT BE CONSIDERED AS RECEIVED UNTIL ALL REQUIRED DOCUMENTS(S) ARE SUBMITTED. THE DISTRICT MUST RECEIVE YOUR COMPLETE APPLICATION BY **MAY 31, 2026**, TO QUALIFY.

**I AM THE OWNER AND RESIDE AT THE PROPERTY DESCRIBED ABOVE. I CERTIFY UNDER THE PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT. I ALSO UNDERSTAND THAT THIS EXEMPTION FORM AND ALL SUBMITTED MATERIALS ARE SUBJECT TO THE DISTRICT'S MEASURE E AUDITS.**

\_\_\_\_\_  
Property Owner's or Authorized Representative Signature

\_\_\_\_\_  
Date

**For Office Use Only**

Reviewed By: Staff Name: \_\_\_\_\_

Staff Signature: \_\_\_\_\_ Staff Review Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Approved**

**Denied**