



# Citrus County Board of County Commissioners

DEPARTMENT OF PUBLIC WORKS  
DIVISION OF ENGINEERING, LAND SECTION  
APPLICATION FOR VACANCY REIMBURSEMENT  
FISCAL YEAR 2019-20  
SOLID WASTE MUNICIPAL SERVICE BENEFIT UNIT

**PLEASE READ THE ENTIRE APPLICATION FORM CAREFULLY BEFORE SIGNING  
SUBMITTAL DEADLINE BEFORE 5:00 P.M. ON JUNE 28, 2019**

## AUTHORITY

Ordinance # 97-02, Section 18 (B) states: An Owner of Improved Real Property who can demonstrate that a dwelling unit thereon was unoccupied and vacant during the entire Assessment Period in which the Annual Disposal Assessment was imposed, shall be entitled to reimbursement for the Annual Disposal Assessment imposed and period during the Assessment Period. Owners seeking such reimbursement shall provide written documentation satisfactory to the Board in order to qualify for such a credit and reimbursement.

## REQUIRED INFORMATION

NAME \_\_\_\_\_

AK# \_\_\_\_\_

MAILING ADDRESS

PROPERTY ADDRESS

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PHONE # \_\_\_\_\_

E-MAIL: \_\_\_\_\_

Owners seeking reimbursement for the solid waste assessment for vacant improved property must provide satisfactory written documentation to the Citrus County Board of County Commissioners in order to qualify for such a reimbursement.

Proof of vacancy may include:

- 1) Utility billing(s) indicating continuous non-residential (minimal) usage for the period including January 1, 2018 through December 31, 2018.  
 Documents attached

- 2) Notarized Affidavit (SEE NEXT PAGE) attesting to dwelling unit being continuously unoccupied and vacant during the stated assessment period.

Mail this completed form together with written proof of vacancy to:

**DIVISION OF ENGINEERING/LAND SECTION  
3600 W. SOVEREIGN PATH, SUITE 205  
LECANTO, FLORIDA 34461**

**THIS FORM ALONG WITH YOUR PROOF MUST BE RECEIVED BEFORE 5:00 P.M. ON JUNE 28, 2019.  
FAILURE TO DO SO WILL RESULT IN THE FORFEITURE OF THE REIMBURSEMENT**

## APPROVAL PROCEDURE

Eligibility for a Vacancy Reimbursement will be determined based on evidence of a vacancy provided herein by the Property Owner on or before June 28, 2019 for the Fiscal Year 2019-20 Solid Waste Municipal Benefit Service Unit. A letter of Approval or Denial will be mailed to you from the Land Section. Any reimbursement checks will be mailed from the Citrus County Tax Collector's office.

**AFFIDAVIT**

- 1. I swear or affirm that I am the owner or representative for the owner of the dwelling unit known as: \_\_\_\_\_  
\_\_\_\_\_ (address),  
and further identified by Property Appraiser’s AK # \_\_\_\_\_.
- 2. That said dwelling unit has been and will be continuously unoccupied and vacant during the entire assessment period of January 1, 2018 through December 31, 2018.
- 3. I have attached copies of utility bills and/or attestation from Utility Service(s) representing minimal usage for the assessment period.
- 4. I am requesting reimbursement of funds paid for the herein stated assessment period.
- 5. I swear or affirm that the statements in this Affidavit are true and correct.

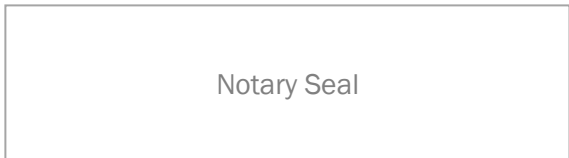
\_\_\_\_\_  
Owner Signature    Date

\_\_\_\_\_  
Owner Signature    Date

**STATE OF FLORIDA COUNTY OF CITRUS**

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_  
(Name of person making statement.)

\_\_\_\_\_.



\_\_\_\_\_  
(Signature of Notary Public-State of Florida)

\_\_\_\_\_  
(Name of Notary Typed, Printed, or Stamped)

Personally Known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_ Type of Identification Produced \_\_\_\_\_

SUBMIT COMPLETED APPLICATION TO:

**DIVISION OF ENGINEERING/LAND SECTION  
3600 W. SOVEREIGN PATH, SUITE 205  
LECANTO, FLORIDA 34461**

**(352) 527-5458**

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