STATE OF LOUISIANA
PARISH OF
FIRST RESPONDER APPLICATION FO
BEFORE ME, the undersigned Notary aforesaid, personally came

(Property ID Number)

FIRST RESPONDER APPLICATION FOR ADDITIONAL HOMESTEAD EXEMPTION, PURSUIT TO ACT 179 OF 2023

	R LEGISLATIVE SESSION	
BEFORE ME, the undersigned Notary Public, duly		vithin and for the State and Parish representing
aforesaid, personally came and appear	(Department Head)	first duly sworn, attested that
(First Responder Jurisdiction Name)		
	ets the following requirements:	
(First Responder Name)		
Full Time employee. AND		
nitials)		
Duties include responding rapidly to a	n emergency. AND	
nitials)		
Resides in the jurisdictional Parish of e	employer. AND	
nitials)		
Is a Peace Officer (Sheriff, Police Office	er, other person deputized by r	proper authority to serve as a
peace officer) OR Fire protection pers	sonnel OR Certified Emergency	services personnel OR
Emergency response operator OR Em		
(Department Head)	(Printed Name)	(Title)
WORN TO AND SUBSCRIBED BEFORE ME, THIS _	(Day) DAY OF(Month)	(Year)
Notary Public	Printed Name	Commission Number
SEFORE ME, the undersigned Notary Public, duly	commissioned and qualified w	ithin and FOR THE State and Paris
foresaid, personally came and appeared	Commissioned and quanties w	, who declares that they meet the
	(First Responder Name)	
foresaid qualifications pursuit to Act 179 of the	2023 Regular Legislative Sessio	n.
(First Responder Signature)	(Printed Name)	
(First Responder Signature)	(Printed Name)	
(First Responder Signature)	(Printed Name)	, (Year)
(First Responder Signature)	(Printed Name) DAY OF	,
(First Responder Signature)	(Printed Name) DAY OF	·
(First Responder Signature) SWORN TO AND SUBSCRIBED BEFORE ME, THIS _ Notary Public	(Printed Name) DAY OF (Day) (Month) Printed Name	(Year) Commission Number
(First Responder Signature) WORN TO AND SUBSCRIBED BEFORE ME, THIS _ Notary Public Louisiana Revised Statute Title 47, Section 1703	(Printed Name) DAY OF (Day) (Month) Printed Name provides a maximum penalty	(Year) Commission Number of \$500 and six months
(First Responder Signature) SWORN TO AND SUBSCRIBED BEFORE ME, THIS _	(Printed Name) DAY OF (Day) (Month) Printed Name provides a maximum penalty	(Year) Commission Number of \$500 and six months

(Address of Property)