## FIRST RESPONDER'S PHYSICIAN CERTIFICATE OF TOTAL AND PERMANENT DISABILITY

Section 196.102, Florida Statutes

I,, a	, a physician licensed pursuant to chapter 458 or		
Physician's name chapter 459, Florida Statutes, hereby certify that	r. 🗌 Mrs. 🗌 Miss 🗌 N	/ls	
Applicant name			
Social Security Number*, is totally and permanently disabled due to an impairment			
of the mind or body, and such impairment renders him	or her unable to engage	in any sul	ostantial
gainful occupation, which condition is reasonably certa	in to continue throughout	t his or he	r life.
☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms	has the following mental or physical		
condition(s):			
It is my professional belief that within a reasonable degree of medical certainty, the above-named			
condition(s) render			
Name of totally and permanently disabled person totally and permanently disabled and that the foregoing statements are true, correct, and complete to			
the best of my knowledge and professional belief.			
Signature Address: (print)	Date		
Street	City	State	Zip
Florida Board of Medicine or Osteopathic Medicine lice	ense number		

Issued on \_\_\_\_\_

NOTICE TO TAXPAYER: Each Florida resident applying for an exemption due to a total and permanent disability that occurred in the line of duty while serving as a first responder must present to the county property appraiser the required physician certificate(s), the required documentation from the Social Security Administration, and a certificate from the employer for whom the applicant worked as a first responder at the time of the injury or injuries, as required by section 196.102(5), Florida Statutes. This form is to be completed by a licensed Florida physician.

NOTICE TO TAXPAYER AND PHYSICIAN: Section 196.102(10), Florida Statutes, provides that any person who knowingly and willingly gives false information for the purpose of claiming the homestead exemption for totally and permanently disabled first responders commits a misdemeanor of the first degree, punishable by a term of imprisonment not exceeding 1 year or a fine not exceeding \$5,000, or both.

\*Disclosure of your social security number is mandatory. It is required by section 196.011(1), Florida Statutes. The social security number will be used to verify taxpayer identity information and homestead exemption information submitted to property appraisers.