



# CERTIFICATION OF TAXABLE VALUE

6/24/2021 9:32:25PM

DR-420  
R. 5/12  
Rule 12D-16.002  
Florida Administrative Code  
Effective 11/12

Year: <b>2021</b>	County: <b>POLK</b>
Principal Authority: <b>CITY OF LAKE WALES</b>	Taxing Authority: <b>CITY OF LAKE WALES</b>

**SECTION I : COMPLETED BY PROPERTY APPRAISER**

1.	Current year taxable value of real property for operating purposes	\$	788,899,215	(1)
2.	Current year taxable value of personal property for operating purposes	\$	97,651,598	(2)
3.	Current year taxable value of centrally assessed property for operating purposes	\$	1,419,448	(3)
4.	Current year gross taxable value for operating purposes (Line 1 plus Line 2 plus Line 3)	\$	887,970,261	(4)
5.	Current year net new taxable value (Add new construction, additions, rehabilitative improvements increasing assessed value by at least 100%, annexations, and tangible personal property value over 115% of the previous year's value. Subtract deletions.)	\$	5,500,460	(5)
6.	Current year adjusted taxable value (Line 4 minus Line 5)	\$	882,469,801	(6)
7.	Prior year FINAL gross taxable value from prior year applicable Form DR-403 series	\$	860,329,804	(7)
8.	Does the taxing authority include tax increment financing areas? If yes, enter number of worksheets (DR-420TIF) attached. If none, enter 0	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Number 3 (8)
9.	Does the taxing authority levy a voted debt service millage or a millage voted for 2 years or less under s. 9(b), Article VII, State Constitution? If yes, enter the number of DR-420DEBT, Certification of Voted Debt Millage forms attached. If none, enter 0	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	Number 0 (9)

<b>Property Appraiser Certification</b>	I certify the taxable values above are correct to the best of my knowledge.		
<b>SIGN HERE</b>	Signature of Property Appraiser: 	Date:	July 1, 2021

**SECTION II : COMPLETED BY TAXING AUTHORITY**

If this portion of the form is not completed in FULL your taxing authority will be denied TRIM certification and possibly lose its millage levy privilege for the tax year. If any line is not applicable, enter -0-.				
10.	Prior year operating millage levy (If prior year millage was adjusted then use adjusted millage from Form DR-422)		per \$1,000	(10)
11.	Prior year ad valorem proceeds (Line 7 multiplied by Line 10, divided by 1,000)	\$		(11)
12.	Amount, if any, paid or applied in prior year as a consequence of an obligation measured by a dedicated increment value (Sum of either Lines 6c or Line 7a for all DR-420TIF forms)	\$		(12)
13.	Adjusted prior year ad valorem proceeds (Line 11 minus Line 12)	\$		(13)
14.	Dedicated increment value, if any (Sum of either Line 6b or Line 7e for all DR-420TIF forms)	\$		(14)
15.	Adjusted current year taxable value (Line 6 minus Line 14)	\$		(15)
16.	Current year rolled-back rate (Line 13 divided by Line 15, multiplied by 1,000)		per \$1000	(16)
17.	Current year proposed operating millage rate		per \$1000	(17)
18.	Total taxes to be levied at proposed millage rate (Line 17 multiplied by Line 4, divided by 1,000)	\$		(18)

Continued on page 2



## TAX INCREMENT ADJUSTMENT WORKSHEET

Year : 2021	County : POLK
Principal Authority : CITY OF LAKE WALES	Taxing Authority : CITY OF LAKE WALES
Community Redevelopment Area : Lake Wales CRA I (40)	Base Year : 1985

**SECTION I : COMPLETED BY PROPERTY APPRAISER**

1.	Current year taxable value in the tax increment area	\$	23,059,817	(1)
2.	Base year taxable value in the tax increment area	\$	8,891,265	(2)
3.	Current year tax increment value <i>(Line 1 minus Line 2)</i>	\$	14,168,552	(3)
4.	Prior year Final taxable value in the tax increment area	\$	22,409,389	(4)
5.	Prior year tax increment value <i>(Line 4 minus Line 2)</i>	\$	13,518,124	(5)

<b>SIGN HERE</b>	<b>Property Appraiser Certification</b>		I certify the taxable values above are correct to the best of my knowledge.	
	Signature of Property Appraiser :	<i>Made Fausp</i>	Date :	July 1, 2021

**SECTION II: COMPLETED BY TAXING AUTHORITY Complete EITHER line 6 or line 7 as applicable. Do NOT complete both.**

6. If the amount to be paid to the redevelopment trust fund IS BASED on a specific proportion of the tax increment value:				
6a.	Enter the proportion on which the payment is based.		%	(6a)
6b.	Dedicated increment value <i>(Line 3 multiplied by the percentage on Line 6a)</i> <i>If value is zero or less than zero, then enter zero on Line 6b</i>	\$		(6b)
6c.	Amount of payment to redevelopment trust fund in prior year	\$		(6c)
7. If the amount to be paid to the redevelopment trust fund IS NOT BASED on a specific proportion of the tax increment value:				
7a.	Amount of payment to redevelopment trust fund in prior year	\$		(7a)
7b.	Prior year operating millage levy from Form DR-420, Line 10		per \$1,000	(7b)
7c.	Taxes levied on prior year tax increment value <i>(Line 5 multiplied by Line 7b, divided by 1,000)</i>	\$		(7c)
7d.	Prior year payment as proportion of taxes levied on increment value <i>(Line 7a divided by Line 7c, multiplied by 100)</i>		%	(7d)
7e.	Dedicated increment value <i>(Line 3 multiplied by the percentage on Line 7d)</i> <i>If value is zero or less than zero, then enter zero on Line 7e</i>	\$		(7e)

<b>S I G N  H E R E</b>	<b>Taxing Authority Certification</b>		I certify the calculations, millages and rates are correct to the best of my knowledge.	
	Signature of Chief Administrative Officer :		Date :	
	Title :		Contact Name and Contact Title :	
	Mailing Address :		Physical Address :	
	City, State, Zip :		Phone Number :	Fax Number :



## TAX INCREMENT ADJUSTMENT WORKSHEET

Year : 2021		County : POLK		
Principal Authority : CITY OF LAKE WALES		Taxing Authority : CITY OF LAKE WALES		
Community Redevelopment Area : Lake Wales CRA II (41)		Base Year : 1998		
<b>SECTION I : COMPLETED BY PROPERTY APPRAISER</b>				
1.	Current year taxable value in the tax increment area	\$	269,557,730 (1)	
2.	Base year taxable value in the tax increment area	\$	109,080,851 (2)	
3.	Current year tax increment value (Line 1 minus Line 2)	\$	160,476,879 (3)	
4.	Prior year Final taxable value in the tax increment area	\$	250,147,630 (4)	
5.	Prior year tax increment value (Line 4 minus Line 2)	\$	141,066,779 (5)	
<b>SIGN HERE</b>	<b>Property Appraiser Certification</b>		I certify the taxable values above are correct to the best of my knowledge.	
	Signature of Property Appraiser : <i>Mandi J. [Signature]</i>		Date : July 1, 2021	
<b>SECTION II: COMPLETED BY TAXING AUTHORITY Complete EITHER line 6 or line 7 as applicable. Do NOT complete both.</b>				
6. If the amount to be paid to the redevelopment trust fund IS BASED on a specific proportion of the tax increment value:				
6a.	Enter the proportion on which the payment is based.	%	(6a)	
6b.	Dedicated increment value (Line 3 multiplied by the percentage on Line 6a) If value is zero or less than zero, then enter zero on Line 6b	\$	(6b)	
6c.	Amount of payment to redevelopment trust fund in prior year	\$	(6c)	
7. If the amount to be paid to the redevelopment trust fund IS NOT BASED on a specific proportion of the tax increment value:				
7a.	Amount of payment to redevelopment trust fund in prior year	\$	(7a)	
7b.	Prior year operating millage levy from Form DR-420, Line 10	per \$1,000	(7b)	
7c.	Taxes levied on prior year tax increment value (Line 5 multiplied by Line 7b, divided by 1,000)	\$	(7c)	
7d.	Prior year payment as proportion of taxes levied on increment value (Line 7a divided by Line 7c, multiplied by 100)	%	(7d)	
7e.	Dedicated increment value (Line 3 multiplied by the percentage on Line 7d) If value is zero or less than zero, then enter zero on Line 7e	\$	(7e)	
<b>S I G N  H E R E</b>	<b>Taxing Authority Certification</b>		I certify the calculations, millages and rates are correct to the best of my knowledge.	
	Signature of Chief Administrative Officer :		Date :	
	Title :	Contact Name and Contact Title :		
	Mailing Address :		Physical Address :	
	City, State, Zip :		Phone Number :	Fax Number :



# TAX INCREMENT ADJUSTMENT WORKSHEET

Year: 2021	County: POLK
Principal Authority: CITY OF LAKE WALES	Taxing Authority: CITY OF LAKE WALES
Community Redevelopment Area: Lake Wales CRA III (42)	Base Year: 1989

**SECTION I : COMPLETED BY PROPERTY APPRAISER**

1.	Current year taxable value in the tax increment area	\$	17,007,773	(1)
2.	Base year taxable value in the tax increment area	\$	8,894,367	(2)
3.	Current year tax increment value (Line 1 minus Line 2)	\$	8,113,406	(3)
4.	Prior year Final taxable value in the tax increment area	\$	15,849,870	(4)
5.	Prior year tax increment value (Line 4 minus Line 2)	\$	6,955,503	(5)

<b>SIGN HERE</b>	<b>Property Appraiser Certification</b>	I certify the taxable values above are correct to the best of my knowledge.		
	Signature of Property Appraiser : <i>M. J. J. J.</i>	Date :	July 1, 2021	

**SECTION II: COMPLETED BY TAXING AUTHORITY Complete EITHER line 6 or line 7 as applicable. Do NOT complete both.**

6. If the amount to be paid to the redevelopment trust fund IS BASED on a specific proportion of the tax increment value:				
6a.	Enter the proportion on which the payment is based.		%	(6a)
6b.	Dedicated increment value (Line 3 multiplied by the percentage on Line 6a) <i>If value is zero or less than zero, then enter zero on Line 6b</i>	\$		(6b)
6c.	Amount of payment to redevelopment trust fund in prior year	\$		(6c)
7. If the amount to be paid to the redevelopment trust fund IS NOT BASED on a specific proportion of the tax increment value:				
7a.	Amount of payment to redevelopment trust fund in prior year	\$		(7a)
7b.	Prior year operating millage levy from Form DR-420, Line 10		per \$1,000	(7b)
7c.	Taxes levied on prior year tax increment value <i>(Line 5 multiplied by Line 7b, divided by 1,000)</i>	\$		(7c)
7d.	Prior year payment as proportion of taxes levied on increment value <i>(Line 7a divided by Line 7c, multiplied by 100)</i>		%	(7d)
7e.	Dedicated increment value (Line 3 multiplied by the percentage on Line 7d) <i>If value is zero or less than zero, then enter zero on Line 7e</i>	\$		(7e)

<b>S I G N  H E R E</b>	<b>Taxing Authority Certification</b>		I certify the calculations, millages and rates are correct to the best of my knowledge.		
	Signature of Chief Administrative Officer :		Date :		
	Title :		Contact Name and Contact Title :		
	Mailing Address :		Physical Address :		
	City, State, Zip :		Phone Number :	Fax Number :	