2021 DISABLED VETERAN EXEMPTION APPLICATION

The deadline to apply is September 1, 2021

K. Wayne Cushing, CPA
Salt Lake County Treasurer

Web: slco.org/treasurer
Email: taxrelief@slco.org
Phone: (385) 468-8300 *(Option #2)*
Fax: (385) 468-8301
Hours: 8AM - 5PM
Address: 2001 S State St., #N1-200
PO Box 144575
SLC, UT 84114-4575

SALT LAKE COUNTY TREASURER

(Office Use Only)
APPLICATION ID: _____
Received: _____
Entered: _____
Audited: _____
Screen Audit: _____

Code(s):

(Office Use Only)

1. *APPLICANT*

Last Name | First | Initial | Birth Date | SS#

Mailing Address | Resident Address

City,State, Zip | Phone | Email

Spouse Name | Birth Date | Death Date *(if deceased)* | SS#

2. *OWNERSHIP*

Real Property *(residential)* **Parcel #: _____ Mobile Home Account #: _____**

NOTE: ☐ ***Property is held in a trust and on file with the Treasurer's agency.***

Motor Vehicles: Year _____ Make _____ Plate # _____

Year _____ Make _____ Plate # _____

Year _____ Make _____ Plate # _____

Year _____ Make _____ Plate # _____

NOTE: If requesting a refund or adding vehicles that are not on record, copies of registrations are required.

3. A*FFIDAVIT*

a.) **I/We hereby certify the following:** *(Mark all which apply)*

☐ Combined percentage of disability certified by the Veterans' Administration is _____%.
NOTE: New applicants and applicants requesting a change in their percent of disability must provide a letter dated within the last year showing the percentage of disability and the effective date granted. In order to qualify for the current year the VA effective date must be January 1, 2021 or prior. (See section 3b for surviving spouse requirements)

☐ I own the residence described and this property is my primary residence.

☐ I have moved and previously applied for the exemption on a different home in Utah. If yes, what date did you move? _____ Former address: _____

☐ I rent out _____ % of my home and/or I use _____ % of my home in a trade or business.

b.) **Only proceed if applying as the unmarried surviving spouse of a qualified veteran:**

☐ I am a United States citizen.

☐ I am a qualified alien as defined in 8 U.S.C., Sec.1641 and lawfully present in the United States.
My Alien Registration Number is _____. My I-94 Number is _____
(New applicants who are qualified aliens must provide copies of their immigration documents)

☐ I have provided a surviving spouse letter from the VA that shows the veteran's disability rating.

☐ I am the unmarried surviving spouse of a veteran who was killed in action or died in the line of duty.
(If you are a new applicant, please submit a copy of DD Form 1300, Report of Casualty, or other evidence of a service-connected death.)

Certification

I/We hereby swear subject to penalties of perjury and other legal and civil penalties that the information provided herein is complete, true and correct. I/We agree and understand that the information provided is subject to verification by Salt Lake County as a consequence of this application for tax abatement. I/We hereby authorize Salt Lake County to inspect and/or receive confidential tax information in any office of the IRS or the Utah State Tax Commission. A copy of this signed application may be relied on as my consent to the inspection or receipt of such records.

Applicant | Date | Spouse | Date

Deliver, email (see above for both) or mail the completed form to:

Salt Lake County Treasurer | Tax Relief Department | PO BOX 144575 | Salt Lake City, UT 84114-4575