



**K. WAYNE CUSHING, CPA**  
**SALT LAKE COUNTY TREASURER**  
 SALT LAKE COUNTY GOVERNMENT CENTER  
 2001 SOUTH STATE STREET #N1-200, SLC UT 84114-4575  
 OFFICE HOURS ARE 8:00 A.M. TO 5:00 P.M.  
 TELEPHONE: (385) 468-8300, THEN SELECT OPTION 2  
 EMAIL: SLCOTREASURER@SLCO.ORG • SLCO.ORG/TREASURER

APPLICANT ID \_\_\_\_\_  
 Received: \_\_\_\_\_  
 Entered: \_\_\_\_\_  
 Audited: \_\_\_\_\_  
 Screen Audit: \_\_\_\_\_  
 (OFFICE USE ONLY)

**APPLICATION FOR 2017 TAX ABATEMENT**  
**for Homeowners and Mobile Home Owners**

**THE STATUTORY DEADLINE FOR FILING APPLICATIONS IS SEPT. 1, 2017.**  
**EXCEPT AS PROVIDED IN UTAH CODE SECTION 59-2-1220(1).**  
**YOU MUST FILE AN APPLICATION EACH YEAR TO CONTINUE RELIEF.**

**1**

Applicant Last Name	First	Initial	Birth Date	SS#
Mailing Address			Resident Address	
City, State, Zip		Telephone Number	Email Address	
Spouse Name	Birth Date	Date of Death	SS#	

**2**

**If you are not the owner of record as of January 1, 2017, please provide herewith a complete explanation of ownership together with copies of supporting documents such as SALES CONTRACT, TRUST AGREEMENT or AFFIDAVIT. Real property held by tenants in common may receive tax relief only on the proportional share owned by the qualifying applicant.**

<b>RESIDENTIAL REAL PROPERTY *</b>	<b>MOBILE HOME *</b>
Parcel Number	Account Number

**\* If the property is held in a trust and the current trust agreement is NOT on file with the Treasurer's Office, you must provide a copy of the trust agreement before relief can be granted.**

**3**

**AFFIDAVIT**

I/We hereby certify the following: (mark all which apply)

- 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 am a home owner age 66 years or older before January 1, 2018.
- I am a surviving spouse (widow/widower). New applicants must provide a copy of spouse's Death Certificate.
- I am a disabled person less than age 66
- I am a person with an extreme hardship **(YOU MUST PROVIDE A BRIEF LETTER DETAILING YOUR FINANCIAL HARDSHIP).**

**3a. Circuit breaker requirements** (also complete Sections 5 and 7 on back):

- I owned and occupied the residence described on January 1, 2017.
- I supplied at least 50% of my own financial support in 2016, and no one can claim me as a dependent on their individual tax return for 2016.
- I have not applied for tax relief in any other county in Utah.
- I will be a resident of/domiciled in Utah for all of calendar 2017.
- The property is not more than one acre. If it is please list acreage \_\_\_\_\_.

**3b. Indigent requirements** (also complete Sections 5, 6 and 7 on back):

- I am a person age 65 years or older before January 1, 2018.
- I am unable to pay the tax assessed when it's due.
- I will be living in the residence described for at least ten months in 2017.
- I do not own income producing assets that can be liquidated to pay the tax when due. See section 6 on the back.
- I have not transferred assets or made gifts of property to any relative or to any trust fund during 2014, 2015, and 2016.  
 (If you have please provide a statement with complete details of all transfers).

**4**

**ALL PERSONS LIVING IN HOME, INCLUDING YOURSELF AS OF JANUARY 1, 2017**

List the **Name(s)**, **Age(s)** and **Relationship(s)** of **ALL** persons living in the residence:

Name	Age	Self	Name	Age	Relationship
Name	Age	Relationship	Name	Age	Relationship
Name	Age	Relationship	Name	Age	Relationship
Name	Age	Relationship	Name	Age	Relationship

Continue on reverse side (Sections 5-7)

Code(s): \_\_\_\_\_

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# 2016 HOUSEHOLD INCOME

INCLUDE ALL INCOME OF ALL MEMBERS OF HOUSEHOLD LISTED IN SECTION 4.  
ATTACH COPIES OF ALL YEAR-END INCOME STATEMENTS.

ATTACH A COMPLETE COPY OF YOUR FEDERAL TAX RETURN INCLUDING ALL SCHEDULES AND ATTACHMENTS.

Check here if you did not file a Federal Tax Return

Adjusted Gross Income per 2016 Federal Tax Return \_\_\_\_\_ /year

Social Security, Medicare, Railroad Retirement, or Military Retirement \_\_\_\_\_ /year

Veterans Disability Pension \_\_\_\_\_ /year

Gross Pension Benefits \_\_\_\_\_ /year

Dividend and interest income, including any nontaxable interest received \_\_\_\_\_ /year

Capital gains excluded from Adjusted Gross Income \_\_\_\_\_ /year

Loss carry forwards claimed on your Federal Tax Return \_\_\_\_\_ /year

Depreciation claimed on the residence described in Section 2 \_\_\_\_\_ /year

Welfare, Worker's Compensation, Alimony, Child Support and Strike Benefits \_\_\_\_\_ /year

Other nontaxable Income (Exclude aid, assistance & contributions from any tax-exempt non-governmental source) \_\_\_\_\_ /year

Earned income credit and other credits claimed on your Federal Tax Return \_\_\_\_\_ /year

Wages, salaries, and other employee compensation \_\_\_\_\_ /year

Gross amount of annuities and trust income received \_\_\_\_\_ /year

Withdrawals and distributions from 401(k), 457, or IRA accounts \_\_\_\_\_ /year

Voluntary contributions to a tax-deferred retirement plan \_\_\_\_\_ /year

Business, Farm, Partnership and Rent income \_\_\_\_\_ /year

Other Income \_\_\_\_\_ /year

Income from other members of household not included above \_\_\_\_\_ /year

\*\*ANY ADULT HOUSEHOLD MEMBER WHO CANNOT PROVIDE THE ABOVE LISTED DOCUMENTATION MUST SUBMIT AN IRS WAGE AND INCOME TRANSCRIPT AND A VERIFICATION OF NON-FILING LETTER.\*\*

**TOTAL 2016 HOUSEHOLD INCOME** \_\_\_\_\_ /year

I rent out my home. \_\_\_\_ % & or I use my home in a trade or business. \_\_\_\_ %

**Mortgage Payment** \_\_\_\_\_ /month

6

**All applicants applying for the indigent/hardship abatement/deferral must complete this section as indicated in section 3B.**

**ATTACH COPIES OF ALL HOUSEHOLD ASSET STATEMENTS.  
STATEMENTS MUST REFLECT END OF DEC. 2016 BALANCES**

Any cash on hand or in checking accounts \_\_\_\_\_

Any savings and credit union accounts \_\_\_\_\_

Balances in 401(k), 457, and IRA accounts \_\_\_\_\_

Market value of investment accounts (include all balances in annuity accounts, mutual funds, NOW accounts, etc.) \_\_\_\_\_

Securities (including stocks and bonds) \_\_\_\_\_

Trusts (value of assets) \_\_\_\_\_

Partnerships and Other business interests \_\_\_\_\_

Any other financial asset \_\_\_\_\_

Rental Property (describe) \_\_\_\_\_

\_\_\_\_\_

Real Estate other than the residence on which relief is requested (describe) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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## 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 and to inspect and/or receive banking and investment information from any financial or securities institution holding such information. 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

**Mail the completed form to: Salt Lake County Treasurer  
Tax Relief Division  
PO BOX 144575  
Salt Lake City, UT 84114-4575**