

2025 PROPERTY TAX RELIEF APPLICATION



Please file early. We may need additional documentation.
ALL SUPPORTING DOCUMENTS MUST BE RECEIVED BY SEPT 1, 2025.

Please check the type(s) of property tax relief you are applying for:

☐ Blind ☐ Veteran with Disabilities ☐ Vehicles ☐ Deployed Military ☐ Circuit Breaker ☐ Indigent County

Applicant's Last Name First Name Middle Initial Date of Birth

Applicant's Email Applicant's Phone Number

Co-Applicant's Last Name First Name Middle Initial Date of Birth

Co-Applicant's Email Co-Applicant's Phone Number

Address City & State Zip Code Property Account Number

1. ☐ YES ☐ NO Did you own this property as of January 1st of the current year? (*N/A for Veteran relief*)
2. ☐ YES ☐ NO Is this property your primary residence? (*County may require residency verification*)
3. ☐ YES ☐ NO Have you filed for property tax relief for the current year in another country or state?
If yes, where? _____
4. ☐ YES ☐ NO Is your property in a Trust Agreement? *If yes, a copy of the Trust Agreement must be provided.*
5. ☐ YES ☐ NO Does your property exceed one acre? If yes, total number of acres: _____
6. ☐ YES ☐ NO Do you rent out a portion of your home? If yes, what percent is rented? _____
7. ☐ YES ☐ NO Do you use part of your home for business purposes? If yes, what percent is business? _____

BLIND EXEMPTION – A verification statement signed by a licensed ophthalmologist must be provided.

8. Check the applicable box: ☐ I am legally blind in both eyes, OR ☐ I am an unmarried spouse or minor orphan of a deceased blind person (*death certificate and proof of relationship must be provided*)

VETERAN WITH DISABILITIES EXEMPTION –

Your DD214 and VA letter showing disability rating must be provided

9. Check the applicable box: ☐ I am a veteran with a service-connected disability, OR ☐ I am an unmarried spouse or minor orphan of a deceased veteran with disabilities who served in military forces of the United States
10. ☐ YES ☐ NO Will you reside in this property on September 1st of the current year?

BLIND or VETERAN exemptions for personal property only (cars, trailers, etc.) please contact our office

DEPLOYED MILITARY EXEMPTION – Your travel voucher(s) or DTS equivalent must be provided.

11. Check the applicable box: I was a military member in the military forces of the United States or Utah
- ☐ on orders for at least 200 calendar days outside Utah in 2024, OR
- ☐ on orders for 200 consecutive days outside Utah across 2023 – 2024

OFFICE USE ONLY

☐ Approved ☐ Incomplete _____ ☐ Denied _____

☐ Blind ☐ Veteran with Disabilities ☐ Vehicles ☐ Deployed Military ☐ Circuit Breaker ☐ Indigent County

Income Amount _____ Veteran % _____

For both income-based tax relief programs, Circuit Breaker and Indigent County, proof of income must be submitted. Proof of income includes a full tax return and three (3) months of bank statements, or, if you no longer file taxes, all 1099s and three (3) months of bank statements for all household members. You may be asked for additional documentation.

CIRCUIT BREAKER – Prior year income documents for the household must be provided.

12. ☐ YES ☐ NO Will you be 66 or older before December 31st of the current year?

If under age 66, are you an unmarried widow or widower? ☐ YES ☐ NO

If an unmarried widow(er), a death certificate for the decedent must be provided.

13. ☐ YES ☐ NO Are you disabled? If yes, a medical statement signed by a doctor must be provided.

14. ☐ YES ☐ NO Are you paying taxes on extreme hardship? If yes, the Hardship form must be submitted.

15. ☐ YES ☐ NO Will you live at this address as your primary residence for the entire application year?

16. ☐ YES ☐ NO Were you financially self-supportive for the previous year?

(Cannot be claimed as a dependent on a tax return).

17. ☐ YES ☐ NO Do you own any other Real Estate? If yes, please list: _____

18. List all household members living in the home during the previous year *(additional sheets can be submitted if needed - all household members must provide income documentation)*

Name	Age	Relationship	Name	Age	Relationship
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**PRIOR YEAR GROSS INCOME – include for self and all others living at home –
- supporting documents must be provided (full tax return, social security, etc.)**

Social Security, railroad retirements benefits and/or other government programs	\$
Gross wages, salaries, tips, and/or other compensation	\$
Pensions, annuities, VA disability benefits and/or trust income	\$
Welfare, unemployment, alimony and/or strike benefits	\$
Interest and/or dividends (taxable and non-taxable)	\$
Other income (rent, capital gains, etc.)	\$
TOTAL GROSS HOUSEHOLD INCOME	\$

*Household income must be no more than ***\$42,623** to qualify for Circuit Breaker or Indigent County Abatement(s).*

**INDIGENT COUNTY – In addition to the requirements of Circuit Breaker relief, complete the following:
List all liquid asset balances and provide bank statements for three (3) consecutive months for all banking institutions for the household.**

SAVINGS	CHECKING	CDs	MONEY MARKET	Stocks, Bonds, Annuities, Cash, Etc.

Under penalties of perjury, I declare that I am a lawful resident of Washington County and to the best of my knowledge and understanding, the information supplied on this application and all documents attached are true, correct and complete. If applicable, I have included the income from all members of the household and authorize Washington County to inspect and/or receive tax information on household members from any office of the IRS or the Utah State Tax Commission as well as records from any financial institution. If applying for the Veteran's Exemption or Deployed Military, I authorize Washington County to inspect and/or receive information from the Veterans Administration and/or Department of Defense.

Applicant Signature _____ Date _____

Co-Owner Signature _____ Date _____

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