

2025 VETERAN'S PROPERTY TAX RELIEF



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


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. Applicant is a(n): ☐ Veteran with a disability, OR
☐ Unmarried spouse/minor orphan of a veteran with a disability and/or a deceased veteran
2. ☐ Yes ☐ No Is this property still your primary residence?
3. ☐ Yes ☐ No Have you filed for any Tax Relief this year in another county or state?
If yes, where? _____
4. ☐ Yes ☐ No Is your property in a Trust Agreement? *If yes, a copy of the Trust must be on file in our office.*
If yes, were there any changes to the trust in the past year ☐ Yes ☐ No *(Must include copy of changes.)*
5. Will you reside in this property on September 1 of the current year? ☐ Yes ☐ No
6. Enter your Service Connected/Unemployable Disability rating here: 
You will need to provide a copy of your DD214 and current VA disability letter.

OATH AND SIGNATURE

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 answers on this form are true, correct and complete.

Applicant's Signature: _____ Date: _____

Co-Owner's Signature: _____ Date: _____

(If home is owned in joint tenancy.)

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