

2021 ABATEMENT APPLICATION



1. Please check the type(s) of relief you are applying for:

- Circuit Breaker Blind County Deployed Military Veteran or unmarried spouse/minor orphan Vehicles Only

2. _____
Applicant's Last Name First Name Middle Name Date of Birth Social Security Number

3. _____
Spouse's Last Name First Name Middle Name Date of Birth Social Security Number

4. _____
Address City & State Zip Code Phone Number

5. _____ OR _____
Account Number Property Serial Number

- 6. Yes No Did you own this property as of January 1, 2021?
- 7. Yes No Is this property your primary residence? *County may require residency verification.*
- 8. Yes No Have you filed for any Tax Relief this year in another county or state? If yes, where? _____
- 9. Yes No Is your property in a Trust Agreement? *If yes, a copy of the Trust must be on file in our office.*
- 10. Yes No Does your property exceed one acre? If yes, total number of acres: _____
- 11. Yes No Do you rent out a portion of your home? If yes, what percent is rented? _____ %
- 12. Yes No Do you use part of your home for business? If yes, what percent is business? _____ %

VETERAN WITH DISABILITIES EXEMPTION

13. Enter Your Service Related/Unemployable Disability Rating Here: _____

Your Veterans Administration letter showing % of disability or unemployable rating must be on file in our office.

- 14. I am a veteran disabled as a result of military service, OR
- 15. I am an unmarried spouse or minor orphan of a deceased veteran with disabilities who served in the military forces of the United States or of this State.
- 16. Will you reside in this property on September 1 of the current year? Yes No **Skip to Number 38 for signature**

For disabled veteran or blind exemption on personal property (cars, trailers, etc.) please contact our office

BLIND EXEMPTION *A verification statement signed by a licensed ophthalmologist must be on file in our office.*

- 17. I am legally blind in both eyes, OR 18. I am an unmarried spouse or minor orphan of a deceased blind person.
- Skip to Number 38 for signature**

DEPLOYED MILITARY EXEMPTION

Submit a copy of your travel voucher (or DTS equivalent) with your application.

- I was a military member in the military forces of the United States or this State,
- 20. on orders for at least 200 calendar days outside Utah in 2020; OR
- 21. on orders for 200 consecutive days outside Utah across 2019-2020.
(If the last qualifying day was in 2021, apply in 2022.)

Skip to Number 38 for signature

19. Qualifying Duty Dates
From To

_____	_____
_____	_____
_____	_____
_____	_____

CIRCUIT BREAKER AND ABATEMENT EXEMPTION - Must include 2020 income documents.

22. []Yes []No Will you be age 66 (Circuit Breaker) or older before December 31, 2021?

If under age 66 23. []Yes []No Are you an unmarried widow or widower?

If you answered yes, enter month and year of spouse's death: _____
(First time applicants please submit copy of spouse's death certificate.)

24. []Yes []No Are you disabled? (Submit a medical statement signed by your doctor)

25. []Yes []No Are paying taxes an extreme hardship? (Submit additional Hardship info)

26. []Yes []No Will you live at this address for the entire year of 2020 and is this your primary residence?

27. []Yes []No Were you financially self-supportive in 2020? (No one claimed you as a dependent on a tax return.)

28. []Yes []No Do you own any other Real Estate? If yes, please list: _____

29. Please list any other assets and account balances, including savings, checking, certificates of deposits, etc.

NOTE: This information is required to determine program eligibility for County abatement _____

30. Please list all household members living in the home during 2020. Include their incomes in lines 30-35.

Name Age Relationship Name Age Relationship

2020 GROSS INCOME – INCLUDE INCOME FOR YOU & ALL PEOPLE LISTED IN ITEM #29.

You Must Attach 2020 Income Documents To Verify These Amounts.

31. Social Security, railroad retirement benefits and/or other government programs.	\$
32. Gross wages, salaries, tips, and/or other compensation.	\$
33. Pensions, annuities, V.A. disability benefits and/or trust income.	\$
34. Welfare, unemployment, alimony and/or strike benefits.	\$
35. Interest and/or dividends (taxable and non-taxable).	\$
36. Other income (Specify: rent, capital gains, etc.)	\$
37. TOTAL 2020 GROSS HOUSEHOLD INCOME (Add lines 31 through 36).	\$

Household income must be no more than \$34,666 to qualify for a Circuit Breaker or County Abatement

For tax relief amounts to show on the 2021 Tax Notice, this application must be filed by September 1, 2021

CERTIFICATION 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 information supplied on this application and all documents attached are true, correct and complete. 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.

38. Applicant's Signature: _____ 39. Spouse's Signature: _____

40. Date: _____ A Signed Application Needs To Be Filed Each Year by Sep. 1st To Qualify For The Tax Relief Programs.

If someone other than the applicant is preparing and/or signing the form, please attach a copy of the Power of Attorney

Name of Person Preparing This Form: _____

Full Address: _____

Telephone Number: _____

Signature of Person Preparing This Form: _____

FILING DEADLINE - SEPTEMBER 1