

2019 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, 2019?
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.
Skip to Number 37 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.*

16. [] I am legally blind in both eyes, OR 17. [] I am an unmarried spouse or minor orphan of a deceased blind person.
Skip to Number 37 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,
19. [] on orders for at least 200 calendar days outside Utah in 2018; OR
20. [] on orders for 200 consecutive days outside Utah across 2017-2018.
(If the last qualifying day was in 2019, apply in 2020.)
Skip to Number 37 for signature

18. Qualifying Duty Dates	
From	To
_____	_____
_____	_____
_____	_____
_____	_____

CIRCUIT BREAKER AND ABATEMENT EXEMPTION - Must include 2018 income documents.

21. Yes No Will you be age 66 (Circuit Breaker) or older before December 31, 2019?

If under age 66 22. 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.)

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

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

25. Yes No Will you live at this address for the entire year of 2019 and is this your primary residence?

26. Yes No Were you financially self-supportive in 2018? (No one claimed you as a dependent on a tax return.)

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

28. 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 _____

29. Please list all household members living in the home during 2018. Include their incomes in lines 30-35.

Name Age Relationship Name Age Relationship

2017 GROSS INCOME – INCLUDE INCOME FOR YOU & ALL PEOPLE LISTED IN ITEM #29.

You Must Attach 2018 Income Documents To Verify These Amounts.

30. Social Security, railroad retirement benefits and/or other government programs.	\$
31. Gross wages, salaries, tips, and/or other compensation.	\$
32. Pensions, annuities, V.A. disability benefits and/or trust income.	\$
33. Welfare, unemployment, alimony and/or strike benefits.	\$
34. Interest and/or dividends (taxable and non-taxable).	\$
35. Other income (Specify: rent, capital gains, etc.)	\$
36. TOTAL 2018 GROSS HOUSEHOLD INCOME (Add lines 30 through 35).	\$

Household income must be no more than \$33,530 to qualify for a Circuit Breaker or County Abatement

For tax relief amounts to show on the 2019 Tax Notice, this application must be filed by September 1, 2019

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.

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

39. 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