

# Davis County Board of Equalization REQUEST FOR CONSIDERATION OF LATE ABATEMENT/EXEMPTION APPLICATION

Curtis Koch **Davis County Auditor**61 South Main Street
P.O. Box 618 – Room 101
Farmington, UT 84025

Applicant Name (Print or Type)					
Mailing Address	City, State, Zip				
Daytime Telephone No.	Email Address				
Property Serial Number	Abatement Program				
Choose your circumstance(s):					
Medical Emergency  Describe the nature of the medical emergency and property owner(s):	the relationship of the individual with the emergency to the				
Identify the length of the medical emergency:	/to/				
Did this medical emergency require hospita					
Identify the length of hospitalization:	DD MM YY DD MM YY				
Death of owner or immediate family me	ember				
Name of decedent and relationship to owners(s) (if	applicable):				
Identify the date of death://///YY	_				
Describe the nature of the extraordinary and unant	<b>istances</b> (submit copies of documentation to verify) cicipated circumstance:				
Identify the length of the extraordinary and unanticipated of	rircumstance: / /				
racinity the length of the extraorantary and unanticipated t	DD MM YY				
I certify, as per UT Code 78B-18a, that all statements herein	n and/or attachments are true, correct and complete.				
Signature	 Date				



# 2024 APPLICATION FOR LOW **INCOME CIRCUIT BREAKER & INDIGENT** PROPERTY TAX ABATEMENT

Curtis Koch, MBA, CGFM

**Davis County Auditor** P.O. Box 618

Farmington Utah 84025 Telephone: (801) 451-3331

For Homeowners and Mobile Home Owners

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YOU MUST FILE AN APPLICATION EACH YEAR TO RECEIVE TAX RELIEF

This application is made for abatement of ad-valorem property tax in accordance with U.C.A. § 59-2-Part 12 Property Tax Relief.

The deadline to	r tiling	g this a	pplication	with I	Javis Count	ty is	September 1	
1. Applicant Informa	ition							
Applicant's Last Name	F	First		Initial	Date of Birth	Socia	al Security Number	
Spouse's Last Name	F	First		Initial	Date of Birth	Socia	al Security Number	
Mailing Address (Street, Suite #, Apr	t #)	City, St	ate, Zip Code			Tele	phone	
Email Emergency Contact		ency Contact			Secondary Phone Number			
2. Property Informat Residential Parcel Number Real Property			Mobile Home		Vehicle Identification	ı Numbo	er:	
Is any portion of your home rented?	Y	N	Is any portion of your home used for Trade or Business?		Y N			
Portion of Home Rented:		%	Portion of Pro	perty U	sed for Busines	s?		%
Is this property in a Trust?	Υ	N	lf Yes, please pi	rovide a	copy of the Trust			
3. Affidavit								
hereby certify the follow I am a United States ( I am qualified as an al My Alien Registration	Citizen. ien as c n Numb <u>All appl</u>	oer is licants mi	ust provide co	M pies of in	ly I-94 Number mmigration doc	is		
I owned and occupied	I the res	idence d	escribed on Ja	nuary 1	, 2024.			

I have not applied for tax relief in any other county in Utah.

I furnished my own financial support in 2023 and cannot be claimed as a dependent on any other tax return.

I am an unmarried surviving spouse (widow/widower). New applicants must provide a copy of Death Certificate. My property exceeds one acre. The total acreage is

# Circuit Breaker Requirements (age 66 & older):

I am a home owner age 66 years or older as of December 31, 2024.

I will reside in Utah all of calendar year 2024.

### **Low-Income Indigent Requirements:**

I am a home owner age 65 or younger as of December 31, 2024 I will reside in the home at least 10 months of the current year I am a disabled person less than age 66 (A signed statement from licensed physician documenting the nature and extent of the disability) I am a person with an extreme hardship (Attach statement of extreme hardship)

4. Members of Household List all persons living in the residence and earning income, including yourself, as of January 1, 2022					
Name	Relationship	Age	2020 Income		
Name	Relationship	Age	2020 Income		
Name	Relationship	Age	2020 Income		

## 5. Total Gross Household Income - Taxable & Nontaxable

- Applicants must include "total gross income" for all members earning income (including members above).
- Attach a complete copy of all applicable 2021 Federal Tax Return including all schedules and attachments.
- If no applicable 2021 Federal Tax Returns were filed, copies of all income statements for members earning income must be submitted.

Social Security (include Medicare Premium)	\$		
Railroad Retirement, Military Retirement, State Supplemental	\$		
Income			
Gross Wages, Salaries, and Other Employee Compensation	\$		
Unemployment, Alimony, Child Support, and Strike Benefits	\$		
Welfare Payments, Food Stamps	\$		
Pensions, Annuities, and Trust Income	\$		
Distributions from: 401K, Roth's, IRA's, or other sources	\$		
Rent, Business, Farm, or Partnership Income, Royalties	\$		
Interest, Dividends, etc.	\$		
Capital Gains	\$		
Other Income Year Loss/Rental Depreciation	\$		
Earned Income Credit, Additional Child Tax Credit, and other	\$		
Tax Credits			
Other Income (ex. Jury Duty, Prizes, Gambling):	\$		
TOTAL 2021 Gross Household Income	\$		
Total Gross Household Income Amount to Qualify May Not Exceed \$0.00???????			

# 6. ALL APPLICANTS MUST SIGN THE APPLICATION

Subject to penalties of perjury and other legal and civil penalties, I declare that the information supplied on this application and all documents attached is true, correct and complete. I further declare that I am a resident of Davis County. I have included the information from all members of the household and authorize Davis 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. A copy of this signed application may be relied on as consent to the inspection or receipt of such records.

Applicant's Signature	Date
Spouse's Signature	Date

# 7. Filing Deadline is September 1, 2021

The filing deadline for all abatements is on or before September 1, 2024. If any questions please call 801-451-3331or 801-451-3543.

8. Submit the Completed Fo	orm to: DAVIS COUNT	Y TAX ADMINISTRATION
Mail:	In Person:	Via Email:
PO Box 618, RM 101	61 South Main Street	TaxAdmin@daviscountyutah.gov
Farmington UT 84025	Farmington UT 84025	Please include all documents required
	Г	
(FOR COUNTY OFFICE USE ONLY)	L Circuit Bre	aker Abatement Ś

(FOR COUNTY OFFICE USE ONLY)	Circuit Breaker Abatement	\$
Received by	Circuit Breaker II Abatement	\$
Date	Indigent/Disabled Abatement	\$